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AND WELFARE

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WELFARE in REVIEW

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U. S. DEPARTMENT OF
HEALTH, EDUCATION, AND WELFARE

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Public Welfare Research and Statistics

GENEVIEVE W. CARTER*

CONCERTED ATTENTION to the upgrading and development of research and statistical programs in public welfare is long overdue. The Public Welfare Amendments of 1962 embodied provisions for a new emphasis on services for prevention and rehabilitation. As a consequence, the upgrading of professional staff, reduced caseloads, and provision of services have become primary concerns of public welfare administrators and program consultants. But the new role of research and statistics as an integral part of the implementation of these legislative actions calls for comparable attention.

It is timely and expedient for State departments of public welfare to direct their attention to the strengthening and development of their research and statistical programs. No longer can public welfare officials respond to the range of inquiries and questions with explanations drawn only from expert experience and data available from minimal program statistics. New types of research questions about poverty and dependency are being posed, and the answers require broader use of research methods. As welfare programs extend coverage, research issues are increasingly directed toward high-risk groups and the effectiveness of preventive or corrective measures.

Additional monies are now available through Federal provisions for grants to States for program demonstration and for research programs. States are also called upon to participate in research and demonstration projects financed by voluntary foundations. Competent research staff is needed for this new era of projects, research proposals, and sound evaluation.

Staff training opportunities are available for the upgrading and development of research and statistical staff. Such staff development requires not only an appraisal of potential staff to be selected for research training but also a clarification of the research functions which public welfare agencies are seeking to develop. Objectives for research and statistical activities must be reappraised in terms of the present advances in social science research.[1] Research and statistical programs in State departments of public welfare have frequently been circumscribed by limitation to fiscal accountability and public information. Necessary demands for client population descriptions and day-by-day facts have tended to set narrow boundaries for the use of research.

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*Acting Director, Division of Research, Welfare Administration, and chairman of the committee appointed by Commissioner Ellen Winston to prepare a rationale and minimum requirements for the position of director of research and statistics in State public welfare agencies. In addition to the chairman, working members of the committee were Ellen Perkins, Gertrude Morton, Seth Low, Lee Burchinal, and Joseph Lagey. The committee also had the benefit of consultation from Corinne Wolfe, Ellis Berne, and several State welfare directors who were available to review the report.

[1] The term "social science research" is used in its broadest meaning. It may include the fields of sociology, economics, social work, or social psychology. Mathematical statistics may also be an important component. Most important is the transferability of research skills to the problems of social welfare.

Concern for new knowledge about causes and alleviation of poverty and dependency has been expressed primarily through the research activities of the universities and special study groups. Research into the business of public welfare agencies should now become a central interest of public welfare. This change cannot occur without a new look at the level and range of social science research competence available within the research and statistical organization of State welfare agencies.

If these changing conditions are not recognized, the imbalance between research personnel and other professionals in the various divisions of the State welfare departments will continue to grow. As the public welfare agencies push ahead with improved levels of service and higher standards for other professional personnel, the uneven development to date of research and statistical competencies becomes more apparent.

A number of factors determine the quality and effectiveness of a State welfare research program. One of the most important is a supportive administrative climate. This report, however, is primarily directed toward examining the rationale for higher standards for research personnel and the requirements necessary for acceptable and desirable research performance in the public welfare agency.

In order to bring into the research organization the personnel of the caliber required for new responsibilities, it is necessary (1) to improve classification and compensation plans and (2) to insure broadly based recruitment and valid selection methods, including establishment of acceptable minimum qualifications. The qualifications recommended in this report represent a consensus of research and personnel administrators on the currently essential preparation for welfare research directors. There are States where the minimum qualifications for research directors are already at a higher level but more States where the qualifications are lower. This report presents a "floor" on minimum requirements to assure at least a minimum level of competence. Higher qualifications should be maintained where they now exist and established when feasible in the other States.

Place of Research in the Public Welfare Agency

The basic premise of this report is that research and statistical functions are sufficiently specialized and distinct to warrant a specialized division or unit in the agency's organizational structure, regardless of the size of State programs. In addition to the advantages of coordinating the various types of program statistics, a centralized organization of research and statistical functions permits effective and efficient research supervision as well as mutual support of related social science disciplines. In large agencies that have responsibility for several different programs, subunits can be established within the research operations for special areas, such as child welfare, the various assistance programs, and medical aid programs. In the larger agencies, further specialization of research functions is often developed by grouping statistical data-processing functions, program analyses functions, and project or special studies functions.

There is great variation among State agencies in the organizational position of the research and statistical operations. The prospects for getting the most out of the available research resources are diminished when the communication channels from the State commissioner and his top program staff to the research and statistical personnel span several administrative levels. Furthermore, if the research functions are important and unique among the professional skills of the agency, the research perspective is as important to good program administration and development as the program consultant's perspective and should be heard independently and directly by the administrator.

In some State agencies, the research and statistical functions are subsumed under the accounting or finance functions. Under this arrangment the social aspects of the public welfare programs tend not

to be explored. The accountant has expert but different skills and perspectives from those of the social statistician and research worker. Furthermore, by virtue of his specialization, the accountant's interests are likely to be centered on fiscal matters, rather than on an analysis of broad social problems. This type of organizational placement has the added disadvantage of concentrating only on statistical concepts of financial accountability at a time when there is an impetus for increased attention toward concepts of prevention and reduction of dependency.

Another typical organizational pattern locates research functions under public information. Although it is extremely important to interpret welfare programs to the public, the use of research and statistics principally for this purpose seriously limits the potential of the research program. The research worker should maintain a disciplined scientific approach and may not have the skills required for effective popular presentation of information.

Some State agencies have decentralized research functions with research and statistical personnel attached to various program units. There may be special circumstances which support the dispersion of specialized personnel. As a general organizational principle, the grouping of these specialized functions provides for better research leadership, supervision, and career opportunities. The research team climate offers considerable inducement for recruitment and retention of qualified research staff.

An important factor influencing the upgrading and development of the research functions is the position of the research director in the organizational pattern. When top staff meetings include the research director, when there is individual access between the research director and the State administrator, when the channels are open for easy communication among program directors and other staff specialists, then there are better possibilities for developing research resources that underpin and facilitate the total agency program.

Therefore, upgrading research functions in the public agency includes not only improvement of research skills and research leadership within the research program but also the upgrading of the research operations within the overall organizational structure. No specific organizational pattern is prescribed in this report, but principles which support a favorable climate for development of research and statistics are posed.

Functions of Research in Public Welfare

Four general categories of research activities are presented to explain the major areas of research and statistical operations:

1. The core program of public welfare statistics. These activities include the collection, processing, analysis, and summarization of ongoing program and administrative statistics in public assistance, medical care, child welfare and other public or voluntary welfare programs.

This kind of research operation requires knowledge of the purposes, content, and administrative policies and procedures of the welfare programs and skill in techniques of forms design and instructions, in principles and mechanics of data processing, and in principles and methods of tabular presentation.

The basic research and statistical program provides the data sources for information and service requests (including legislative), periodic reports, and special subject reports from sources within and outside the agency.

2. The basic pool of related information and resources. Each State research and statistical department would be expected to develop and maintain a central pool of working resources such as U.S. Bureau of the Census reports, labor force data, welfare financing data, selected health, delinquency, crime, and related data, cost-of-living data, and other current sources of information including periodicals, significant studies in fields related to public welfare, and selected literature essential as daily research tools.

3. Administrative and program studies. These studies serve as a factual basis for evaluating and directing agency program operation and development. This category of research activities includes analytical studies involving interpretation of social, economic, and program characteristics and trends as well as other types of administrative research. There are two general subdivisions: (a) administrative studies and (b) program studies. At present the quality control study represents a typical activity in the administrative studies subcategory. Other examples may be staff deployment and caseload studies or techniques for testing effectiveness of operating procedures. This type of research operation requires knowledge of management and administrative theory, and of administrative policies, procedures, and operations in public welfare programs. It also requires a knowledge of the principles and methods of social work practice. Frequently, skills involved are those of research ordinarily termed "operations research," including methods and techniques such as acceptance sampling and linear programming, as well as other methods and techniques commonly used in the area of studies directed toward improving the bases for administrative decision-making.

The kind of research operation involved in program studies requires knowledge not only of the purposes and content of welfare programs but also of sociological and psychological factors in modern industrial societies and of population composition and trends. It also requires skill in methods and techniques of survey research (including probability sampling) and statistical relationships, and skill in analysis and writing. Such analysis also includes the relationships gleaned from findings of related studies. Projecting or testing consequences of policy on programs and services would also be included. Further examples of program studies are characteristics studies, studies of need for services, evaluation studies, and program planning and development. In general, program research is geared toward immediate and frequently specific research issues where findings feed directly into administrative program decisions and actions.

4. Social research and demonstration-research projects. This category of research activities embodies scientific investigation and the use of research methods appropriate for the problem formulated. The full range of social science research techniques and methods will likely be required: relevant theory development, a sound design including a testable hypothesis, instrumentation, sampling, data processing, analysis, interpretation, and research report writing. Contrasted with program research, this category of research activities is geared toward a more general level of inquiry where the findings extend existing research-based knowledge and the results can be generalized for a wide range of comparable situations.

In addition to social science research skills, the demonstration-research operation requires knowledge of welfare services or agency programs in order to handle the "input"[2] and evaluation of demonstration projects.

Research and demonstration activities under this category would be expected to yield results which have national as well as local relevance.[3] There are other types of program demonstrations when the purpose to be achieved does not require the research component.

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[2]Demonstration "input" in a controlled project requires a delineation of the service or change factors that are introduced in order to bring about certain desired effects in a particular client group or target area. If the nature as well as the objective of the "input" is not clearly defined, the evaluation of what caused what changes will be most difficult.

[3]It should be pointed out that research standards should be as high for administrative and program research as for category 4, "social research and demonstration-research." The same interdisciplinary research skills are required, although administrative and program studies may be more specifically directed, be completed in shorter time, and deal with fewer variables and less theory.

5. Research consultation. The research specialist in the public welfare agency should bring a special set of skills and expert experience to the agency and program staff and, in particular, to the agency administrator. Advising on the value, of the needs for, and the appropriate uses of research in solving problems and administering public welfare activities constitutes an important area of research activity. The public welfare research staff should have sufficient skills to recognize when and how to use research consultation in the more specialized areas, such as in sampling or demonstration-research design.

Acceptable and Desirable Standards for Research and Statistical Programs

Some variation in research programs among States probably is inevitable--at least for the near future--because State welfare programs and agencies vary considerably in size and complexity. Some variation must also be expected to continue, for a time at least, because States differ considerably in progress made to date in developing their research organizations, staffs, and programs. Some States, however, do not now have even a minimum research program, and other States should be expanding and developing their present research efforts. The information given in this report is intended to provide guidelines for assuring an acceptable research program and acceptable staffing in every State public welfare agency and for achieving a desirable research program in the States that are ready to move toward a more developed research program.

The guidelines given here are based on the principle that the expected scope and level of research performance and the quantity and qualifications of research staff must be consistent, one with the other. In other words, if an agency employs a small staff with only minimum research qualifications, only a minimum scope and level of research program and product can be expected. Or, alternatively, if an agency desires or needs a wide-ranging research program, the agency must employ staff in sufficient numbers and with the research qualifications necessary to carry out such a program.

In accordance with this principle, two levels of standards for research and statistical programs, including minimum qualifications for the position of director of research and statistics, are presented. Level 1 is the minimum requirement when the position of director of research and statistics becomes vacant. Level 2 is presented as a recommendation for future direction of research and statistical program development.

Level 2: Desirable Program of Research and Statistics

A few States and two local agencies have already taken steps (or have plans in process) in the direction of level 2. This level of research and statistical operations should reflect the administrative efforts of the research director in building a research team where there is a reciprocity and range of research competencies and talents adapted to the research objectives of the agency.

The desirable State research operation should include a balanced program of all categories of research activities. Research resources should be (by priority policies) allocated to the various activities along with the strengthening of ongoing statistical operations, methods of meeting day-by-day demands for data, program development, or program evaluation.

A good proportion of the staff should be able to work independently or with outside research consultants as peers in research competence. Within the staff there should be skills for developing proposals for social research projects as well as demonstration research projects. Some of the higher level research personnel should be considered as acceptable peer workers with outside contract research firms and research consultants.

The director and his top staff would be able to provide research leadership and consultation to the agency admin-

istrator as well as agency program consultants.

With the broader and more fully staffed program, the administrator has the benefits of a wide-ranging research product and broadly informed research advice to aid in agency program development and operation.

In considering the requirements for the level 1 or level 2 research program it is important to note the urgency of allowing for a sufficient number of research and statistical positions to carry out the demands of statistical operations in order for certain staff to have the time to develop a more balanced and progressive research program.

Level 2 guideline requirements are: The director should have 1 or 2 years beyond the master's degree in the social sciences or social work, preferably a doctorate. In either case, courses in statistics beyond the usual introductory and intermediate levels and at least 1 year of advanced social science research methods should be included in the advanced graduate work. In addition, there should be at least 5 years of progressively responsible research experience, including successful experience in research program administration involving staff of various levels and competencies. Experience in social welfare research is preferable but related transferable experience in the social sciences is satisfactory.

The intent of the level 2 suggested guidelines, as well as the intent of the requirements specified in level 1, is to extend the recruiting and selection range for the position of research director as well as to affect standards.

Level 1: Acceptable Program of Research and Statistics

A brief description of the operations encompassed in the level 1 research organization is provided as a basis for assessing the requirements needed for the level 1 director of research and statistics in public welfare. Most of the research activities in this program would be concerned with the collection, processing, and summarization of basic program and administrative statistics. Usually the bulk of such activity is carried out through use of federally designed reports and instructions. In addition, most States have use for special forms tailored to meet particular problems or requests for client and program information.

Generally, the level 1 program would rely heavily on designs, data collecting instruments, and procedures developed elsewhere by Federal agencies or by regional or other consultants.

The research staff would develop resource material and other pertinent data for their basic pool of information for their own use and for the agency.

Work on administrative type studies would depend upon availability of staff, other skills within the agency, or the extent to which there was within the research staff the special skills and individual interest for developing and conducting these studies.

Program studies and administrative research would be limited because of the priority attention to the basic statistical program and service reports drawn from the data.

Work in social research projects or demonstration-research projects would be unlikely unless conducted through federally designed studies or in cooperation with local universities or research centers.

Research consultation that can be expected to be available to the administrator or other agency staff would be confined to the scope and skills within the agency research staff's competence and experience.

An interdisciplinary research team would not be expected of the level 1 research and statistical operation. The director of this level program, however, would probably have considerable responsibility for training and developing his statistical personnel.

Requirements for Director of Research and Statistics

As a first step in establishing standards, and as vacancies occur, the position of director of research and statistics in State public welfare agencies will require at least the following minimum qualifications: Graduation from an accredited college or university and a master's degree, preferably in the social sciences or social work, including or supplemented by the equivalent of 12 semester hours in statistics and social research methods. Three years of progressively responsible experience in an organized research and statistical unit, preferably in a social welfare agency or organization, including the planning and conduct of research projects, involving the analysis and interpretation of data and including at least 1 year in a supervisory or administrative capacity.

The Department of Health, Education, and Welfare would make available to State merit systems test materials as well as furnish other necessary technical assistance in establishing examinations for both levels of research and statistical programs.

Steady Gain in Number of Unemployed Parents on Public Assistance Who Find Jobs

In States that include the unemployed in their aid to families with dependent children program, the number of families who achieve independence has been increasing at the rate of more than a thousand a month.

In December 1963, about 2,800 unemployed parents obtained jobs to support their families; in May 1964 (the latest month for which nationwide figures have been compiled) 8,900 did so.

Seasonal improvement in employment opportunities was probably the most important factor in this increase. Adoption of the unemployed-parent provision by more States also played a part. In December, 15 States gave assistance to 53,600 unemployed-parent families; in May, 18 States had this provision and aided 74,300 families.

Greater assistance from welfare workers--in referring parents for employment, in interesting former employers in taking them back, and in helping them to get health, vocational, literacy, and other services to make them more employable--is also responsible for part of the gain in the number of families who became self-supporting. (Increased Federal aid for such services first became available on July 1, 1963, but States are only gradually getting sufficient staff to provide the additional services.)

In all States that provide public assistance to the needy families of the unemployed, the refusal of a parent to accept a job or to train for one disqualifies the family for further aid. Such refusals, however, account for a very small proportion of all closings of unemployed-parent cases.

The average time families of the unemployed need help until parents become self-supporting is only 9 months.

Cooperative Research and Demonstration Grants Program

LEE G. BURCHINAL*

IMPORTANT WEAPONS in the Welfare Administration's effort to increase the effectiveness of social services in reducing and preventing poverty and dependency are rigorous research and the application of such research through demonstration projects. Among all Federal research and demonstration grant programs, the Cooperative Research and Demonstration Grants Program, administered by the Welfare Administration with the cooperation of the Social Security Administration, uniquely focuses on development of knowledge and practices that hold promise of preventing or reducing poverty and dependency. The following describes this program's policy and procedures, operating statistics, present content, and future plans.

POLICY AND PROCEDURES

The operation of the program is based on the statutory authority contained in Title XI, Section 1110 of the Social Security Act as amended in 1956 and on operating principles derived from this basic authority.[1]

Statutory Requirements

First, the law provides authority to make grants, contracts, or cooperative arrangements with universities and other public or private nonprofit agencies for the support of research or demonstration projects relating to "the prevention and reduction of dependency, ...coordination of planning between private and public welfare agencies," or improvement in "the administration and effectiveness of programs carried on or assisted under the Social Security Act and programs related thereto."

Clearly the law permits development of the broad range of research and demonstration activity needed to test the effectiveness of different strategies for intervening in the cycles of poverty and dependency.

Second, the law requires that projects may be supported only on the advice of "specialists who are competent to evaluate the proposed projects as to soundness of their design, the possibilities of securing productive results, the adequacy of resources to conduct the proposed research or demonstration and their relationship to other similar research or demonstrations already completed or in process."

Third, under the law Federal funds can be used to support only part of the cost of a project. In addition, project

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[1]For a description of the program shortly after its beginning, see Merriam, Ida C.: "Cooperative Research and Demonstration Grant Program of the Social Security Administration," Social Security Bulletin, September 1961, pp. 1-9. Under the reorganization in the Department of Health, Education, and Welfare which established the Welfare Administration, the Cooperative Research and Demonstration Grants Program, begun under the Social Security Administration, is now administered by the Welfare Administration with the cooperation of the Social Security Administration and serves the interests of both agencies.

directors must be staff members of public or nonprofit private institutions or agencies. Grants cannot be made to individuals, only to appropriate institutions or agencies, and then only when the institution or agency makes a contribution to the cost of the project. Contributions may be in the form of salaries of staff members assigned to the project, salaries for consultants provided by the agency, or supplies or permanent equipment used in the project. Generally contributions based only on the applicant's share of indirect costs are not considered a sufficient financial contribution to meet this requirement.

The requirement of a financial contribution from the applicant serves three main purposes: (1) to demonstrate the applicant's commitment to the solution of a given problem, (2) to help assure that a maximum number of projects will be aided with the available Federal funds, and (3) to encourage the implementation of successful results in ongoing programs, especially in the case of demonstration projects.

Demands on this program are increasing. It is becoming even more necessary, therefore, to emphasize that each applicant is expected to finance as large a portion of project costs as possible.

One other requirement results from the general Federal policy of restricting grant awards to 1 year, even though most projects require more than a year for completion. The practice followed, as in other Federal grant programs, is to support projects for 1 year at a time, with continuing support dependent upon Congressional appropriations and satisfactory project progress.

Other Policy Requirements and Operating Procedures

One requirement that evokes considerable controversy is the stipulation that the project director must be identified at the time an application is made. Quite naturally, some agencies have asked why they cannot receive a grant on the assurance that, when they receive funds, they will hire competent persons to do the job. There are several reasons for this requirement. First, the evaluation of a grant application is based not only on the project plans that form the core of the application but also on the competence of the person who is to direct the project. Also, approval of an application is based on the promise that the project will be carried out along the lines proposed. Selection of a project director to carry out plans prepared by someone else opens the risk that the project, as it is developed, may be radically different from what had been authorized. While some changes may be favorable, others may not be, and misunderstandings can develop between the applicant and the Welfare Administration.

Second, applicants who cannot name the project director are generally not in a position to develop a design that will meet the criteria of the program. Also, since it is difficult to find competent project directors, grants to applicants who are searching for project directors may encumber funds which, in reality, will never be used. Under these circumstances, the total operation of the grants program is limited.

This requirement of identifying the project director does not rule out development of an application by smaller agencies. Agencies acutely limited by this requirement can explore ways of combining their interests and resources with those of others, particularly university-based personnel or research specialists in departments of welfare. Consultation from the staff of the Welfare Administration or the Social Security Administration may also help an agency develop a needed project, particularly in cases where an agency could free staff if funds became available but lacks manpower to develop a proposal.

There are no hard and fast rules about the duration of projects. Most projects run for 2 or 3 years, but large-scale demonstrations may require 5 years for completion. Thus far, however, no project has been supported more than 4 years. While projects of 2 or 3 years duration are preferred, longer term projects will be considered.

Longer term projects, especially those involving demonstration activities, are expensive. Costs of some of these projects may even exceed $100,000 per year; others, of course, are much less expensive. Plans call for site visits for as many applications as possible where budgets are in excess of $60,000 per year. Site visits will contribute to wiser decisions by the advisory panel, will further safeguard investments, and should contribute to obtaining maximum returns from the program.

The question of the availability of planning grants is raised frequently. On occasion, small grants to allow time and limited funds to prepare the detailed design for a large-scale project are made. However, development grants are not provided any more freely than grants for fully conceived projects.

All requests must be submitted on standard application forms and must be as concrete and specific as possible as to problem identification, relationship to known data, research design, resources available, and description of methods to be used.

Development and Review of Applications

The development and review of applications[2] usually proceed through six distinct steps: (1) informal discussion of an application; (2) formal preparation and submission of the application; (3) review by the staff in the Division of Research, Welfare Administration; (4) review by outside experts; (5) review by the advisory panel; and (6) action by the Commissioner of Welfare and, as appropriate, by the Commissioner of Social Security.

In practice, the first stage is sometimes omitted. Persons request application kits and submit formal applications without any discussion with the staff. This practice is not recommended. Potential applicants are encouraged to make full use of the informal discussion or consultation services.

INFORMAL DISCUSSION

Under this heading is included any form of communication between prospective applicants and staff of the Division of Research. Individuals are urged to initiate such discussion by sending a rough draft of their plans or ideas to the Chief, Research Grants Branch, Division of Research, Welfare Administration. A brief letter will suffice, but a working draft of a design usually provides a better basis for the initial review of a project idea. Staff will first determine whether or not the proposed project is consistent with the legislative authority of the program.

If it appears that the idea would not be appropriate for submission to the program, the applicant is so advised and, if possible, is directed to the appropriate Federal grant or contract program. Early discussion of ideas may also contribute to the development of a project that can better serve the mutual interests of the applicant and the research objectives of the Welfare Administration.

Consulting services are not limited to correspondence, although they are most frequently conducted in this form because of the limited number of staff. On any trip to Washington, persons with ideas for projects they believe would be appropriate for the Cooperative Research and Demonstration Grants Program are encouraged to discuss these ideas with staff. Also, upon receiving a project application in an area of interest, staff can make site visits.

Given an initial favorable reaction on the basis of the informal review, an applicant can proceed with developing a proj-

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[2]Because the Cooperative Research and Demonstration Grants Program serves the interests of the Welfare Administration and the Social Security Administration, staff from both agencies contribute to the development and review of applications. For the present discussion, however, the development and review of applications are described in terms of activities conducted by staff in the Division of Research of the Welfare Administration although all points apply as well to activities of staff in the Division of Research and Statistics of the Social Security Administration.

ect design. Such encouragement, however, does not represent commitment to support the project when it is formally submitted.

FORMAL APPLICATION

In all cases, formal application must be made on forms provided in the application kit. Applicants must provide a detailed budget for the first year of the project, showing applicant contributions and requests for Federal support by various categories of expenses, estimates of applicant and Federal contributions for continuing years, and a narrative describing the proposed project.

The narrative must follow the outline provided on the application form. This outline contains five main points: project plan, previous work done on this project by the applicant, results obtained by others, biographical sketches of the director and all other professional persons who will be actively engaged in the project, and publications of the director in the proposed area or in closely related areas.

Under the project plan, information about five sub-points is required. There should be a brief statement of the purpose or specific aims of the project, whether it is a research or demonstration project, a statement justifying the project and showing how the study would contribute to the solution of important problems confronting the Nation, a detailed step-by-step description of the method to be employed in the study together with a time schedule for completion of various phases of the project, and a description of facilities available for use in executing the study. Of all of these sub-points, the proposed method should receive the greatest attention and should be set forth as clearly and precisely as possible.

Research projects and, to the extent possible, demonstration projects should be rooted in a theoretical framework. Both should be designed to test hypotheses derived from a theoretical or conceptual basis. Without hypotheses which make sense and which are derived from a sound theoretical framework, research or demonstration activity generally adds little to existing knowledge or practice. Careful problem identification, analysis of critical variables, development of basic concepts, and formulation of hypotheses are the indispensable underpinnings of well-designed projects. Without such conceptual specification, the value of the demonstration is limited to the particular time, place, and circumstances of the project. With it, results can be generalized and have value for practice or research, not only in the area in which the specific project was conducted but also for areas linked conceptually to those tested in the specific project.

Concepts must be identified and interrelated in a meaningful manner, usually through the development of precisely stated hypotheses. Either appropriate measuring devices should be described or a clear description provided for the types of data that will be obtained. To the extent possible, scales or other measuring devices should be identified. Sampling plans should be clear and practicable. A logical and appropriate method of analyzing data should be presented. Ways in which hypotheses will be tested should be described. Also, indications should be given of the manner in which findings will be related to the accumulating knowledge and theory relevant to the proposed area of inquiry. And, finally, for demonstration projects, treatment plans must be fully described, and mechanisms for building results into ongoing programs should be identified.

Several additional problems exist for the development of demonstration projects. To be meaningful and to add to our knowledge of practice, demonstration projects require evaluation to determine if the demonstration has had the intended results and, if so, to what extent and why. For this reason, demonstration projects submitted to this program must include carefully developed evaluation procedures which are appropriate to the demonstration being conducted and sufficiently rigorous to allow for reliable generalization of results. Among the methodological points that should be given careful at-

tention are the complexity, probable effectiveness, content, and duration of the demonstration program; types, adequacy, and sequence of measurements to be used for evaluation; use of control groups; and the appropriateness of contemplated analyses.

Applicants should realize that considerable time and effort must be invested in the development of a proposal. Also, they should be committed to the importance of the proposed area of inquiry. After all, if the application is approved, typically a project director will devote the major part of two, three, or more years of his career to a given area of inquiry. It is good practice to seek consultation from colleagues as well as from the Division of Research. Consultation can be on an informal basis, or, as has been done in several projects, through development of formal cooperative relationships among several agencies. Several projects now supported represent joint efforts of private agencies with university personnel or of research specialists in State welfare departments with those in schools of social work or other university departments. Wherever possible, State departments, other public agencies, and private agencies are encouraged to utilize university personnel as consultants in developing applications and as project directors, co-directors, consultants, or as research directors. Combining program interests and knowledge of staff in operating agencies with the competencies of research specialists in the universities usually results in better developed proposals, and, if supported, in projects capable of producing more valuable results.

Formal applications should not be long. Lengthy sections justifying the project are not necessary, nor are exhaustive and detailed discussions of results obtained by others. Applicants are asked to cite no more than five projects closely related to the one being proposed. The real test of the review of literature is whether the most critical or important studies related to the proposed project are cited and integrated into the development of the proposal. Also, personal publications should be limited to the five most closely related to the proposed project. The length of applications has varied from about 8 to 30 pages, with 15 as a typical length. Fifteen pages should be ample; longer applications are discouraged.

Applications may be sent to the Research Grants Branch, Division of Research, Welfare Administration, at any time, but there are three deadline dates for applications--January 15, June 1, and October 1. Applications submitted by January 15 are reviewed by the April meeting of the advisory panel, notification of final action is usually sent in May, and approved projects can be started on June 1. Those submitted by June 1 are reviewed in September or October, notification is sent in October, and projects may begin on November 1. Applications received by October 1 are reviewed in January, notice is usually sent in February, and projects may start on March 1. The time between receipt of applications and their review by the advisory panel is used for staff review and the review by outside experts.

REVIEW BY STAFF

Applications that have been discussed informally with staff generally require only limited additional review by staff at the time of their formal submission. However, even when previous discussion has occurred, applications are checked routinely for completeness, for cooperative budget arrangements, and for any apparent gross omission of information. Applications which have not been preceded by any discussion with staff are checked for these features as well as for their appropriateness for support under this program.

Applications meeting these initial screening criteria are reviewed first by qualified experts in the field of the proposed area of inquiry and second by the advisory panel.

REVIEW BY EXPERTS

Because applications representing many disciplines are received, it is necessary to obtain reviews from a number

of specialists in different fields. To date, several hundred persons in government, universities, foundations, and voluntary agencies have generously donated their services as reviewers of applications. Individual applications are mailed to recognized experts in the field of the proposed project. The expert prepares an evaluation of the project which is available only to staff and to the advisory panel. Most applications are reviewed by three or four experts, sometimes from different disciplines, to assure evaluation from different points of view. When applications directly concern programs of the Welfare Administration or the Social Security Administration, they are reviewed also by specialists in the agency responsible for the program.

ADVISORY PANEL

The advisory panel plays the critical role in the review process. The panel consists of 12 persons who are outstanding in selected fields of research. Efforts are made to obtain balanced representation from disciplines which contribute to research in social welfare and social insurance, notably social welfare, sociology, psychology, and economics. Also, representatives are selected from different parts of the country. To date, 21 persons have served on the panel. Panel members are appointed to 3-year terms, with one-fourth of the membership being replaced each year. Names of panel members are included in application kits.

The panel operates as more than a judge of which applications should or should not be supported. More importantly, it provides constructive suggestions for developing better project designs.

There may be a round of negotiations between staff and project directors on projects recommended for support, particularly when major changes in project designs or budgets are suggested by the advisory panel. After these negotiations are concluded, projects recommended for approval are submitted for final decision to the Commissioner of the Welfare Administration, or, for projects relating to the interests of the Social Security Administration, to both the Commissioner of Welfare and the Commissioner of the Social Security Administration.

OPERATING STATISTICS

The 1956 Amendments to the Social Security Act included authorization for the Cooperative Research and Demonstration Grants Program. In September 1960 funds were first appropriated to implement the program. For fiscal year 1961, $350,000 was appropriated. In fiscal year 1962 the appropriation was increased to $700,000; $1,100,000 was appropriated for 1963 and $1,455,000 for 1964. In March 1964 the House Committee on Appropriations approved $1,700,000 for fiscal year 1965, but, as yet, the Senate has not acted upon the appropriation.

Increased funding for the program has permitted support for increasing numbers of projects. During fiscal year 1961, 16 projects were initiated. Ten of these were continued into fiscal year 1962, and 12 new projects were begun in that year, making a total of 22 active projects in fiscal year 1962. The number of projects supported in 1963 increased to 33, with 16 new projects and 17 continuations. Fiscal year 1964 saw a further increase in the number of supported projects to 37, which included 21 new projects and 16 continuations. It is known that 21 projects begun in previous years will continue into fiscal year 1965. On the basis of the expected $1,700,000 appropriations, it is estimated that 20 new projects can be started, making an estimated total of 41 active projects for the coming year.

As a reflection of the increasingly complex research projects and greater number of demonstration projects being supported under the program, the mean annual cost per project has been increasing steadily. The mean cost per project in 1961 was $21,700. It increased to $31,500 in 1962, $32,200 in 1963, and $39,300 in 1964. For 1965, the average project cost is estimated at $41,500.

With the exception of fiscal year 1962, the number of applications received has remained relatively steady. Fifty-three applications were submitted in 1961, 37 in 1962, and 54 each in 1963 and 1964.

The proportion of applications receiving support has varied slightly over the years of the program: 1961, 30.2 percent; 1962, 32.5 percent; 1963, 28.6 percent; and 1964, 38.0 percent. Overall, the acceptance rate of projects reviewed has been 32.9 percent.[3] Furthermore, of those projects supported, actual funding approximates 75 percent of the original requests. For instance, in fiscal year 1964, among all new projects approved, budget requests totaled $1,353,248, whereas actual grants came to $1,017,328, only 75.2 percent of the original requests.

A total of 115 applications came from universities, 46 from private agencies, 17 from State, county, or city welfare departments, 16 from research institutes or foundations, and 4 from public agencies other than welfare departments. The number of grants made to these types of institutions ranked in about the same order: 46 to universities, 9 to private agencies, 6 to research institutes, bureaus, or foundations, and 4 to State or county welfare departments.

Far more applications for research projects have been received than for demonstration projects. Consequently, awards mainly have been for research projects--by a ratio greater than 3-to-1. Of the 65 grants made, 15 have been for demonstration projects, compared with 50 for research projects. In the future, it is hoped that a closer balance can be maintained between research and demonstration activity.

[3] This acceptance rate is based on 65 approved projects out of 198 reviewed by the advisory panel and activated through June 30, 1964. Actually, 207 applications had been submitted through April 1964, but six applications were either transferred to another grant program or were withdrawn by the applicant prior to review, and another three, while approved in May 1964, did not begin until after June 30, 1964, and are therefore considered as projects begun in fiscal year 1965.

PROGRAM CONTENT AND FUTURE PLANS

The number and kinds of projects supported under the program are constantly changing. Practically every month some projects are completed; approximately every 4 months new projects are added. Consequently, an exact description of the content of the program can be developed only for a specific point in time.

The content of the program as of June 1964 was reported in the June Welfare in Review (pp. 20-23). At that time, 21 projects had been completed, and 44 were being supported. Titles of projects, names of project directors, and agencies receiving grants were given. The 65 projects can be grouped in nine categories:

Substantive area	Number of projects
Research-demonstrations related to social services	13
Social aspects of gerontology	11
Studies of dependency and public assistance	10
Studies of family organization and disorganization	8
Studies of cultural deprivation of children and youth	7
Studies of economic status and its correlates	6
Administrative processes and utilization of professional personnel	4
Studies of demography, community organization, and urban problems	3
Studies of medical services and costs	3
Total	65

Demonstration projects supported under this program are concentrated on testing the impact of social services upon the functioning of dependent fami-

lies.[4] Interagency coordination of services, development of intensive casework services, and use of group work procedures are common elements in these projects.

Among the gerontological projects are several longitudinal studies of retirement based on different occupational groups and studies of the effects of early retirement plans upon workers and the resistance of blue-collar workers to preretirement education programs. Other projects include studies of factors related to decisions regarding institutionalization of aged relatives, the influence of old-age insurance and private pension plans on spending-saving behavior, adjustment of aged persons to low-income housing, integration of older persons with friends as contrasted to relatives and how such relationships are influenced by different kinds of housing arrangements, the relative influence of aging and poverty as factors in social isolation during retirement years, and the development of baseline data for evaluating the effectiveness of projected concerted services for older persons living in public housing.

Studies related to dependency and public assistance also cover a wide range. Several have dealt with the attitudes, aspirations, and feelings of responsibility among women receiving aid to families with dependent children (AFDC) as well as with their housing and economic problems; several others have focused on the consequences for families affected by a State "suitable" home law; another with factors associated with the use and nonuse of public assistance funds by low-income families; intensive analyses of the 1961 survey of AFDC families and children are being undertaken in still another study; and one other investigation focuses on the effects on families and individuals in the rural community when funds for general relief were exhausted.

Teenage illegitimacy and factors associated with keeping or releasing out-of-wedlock babies are the foci of four of the eight studies included under "family organization and disorganization." Other projects in this category include studies of ways in which kinship systems influence the economic functioning of low-income families and how such relationships may impede or facilitate social mobility of low-income persons; influences of family structure, care, dependency, and residence upon family relations and youth development in public housing compared with other forms of housing; and the development of instruments for assessing changes in family relationship patterns.

The social and cultural deprivation studies are concerned mainly with barriers to educational achievement and occupational security. One study focused on the social characteristics and employment experiences of school dropouts, another is analyzing educational barriers to economic security in large cities, while still another examines employment opportunities of Negro and white youth. Two other studies are exploring the social-psychological correlates of dependency and low-income status: one includes rural and urban Iowa youth; the other includes youth from slums in New York City. The use of a short-term reading readiness program in a nursery as a social intervention technique for overcoming social deprivation is also being investigated.

Under "economic status and its correlates" are investigations of the use made of credit unions by low-income groups, a study of interrelationships between economic status, unemployment, and family growth, a comparative analysis of the culture of poverty in Puerto Rico and New York, the availability and use made of temporary disability insurance by farm workers, the development of a design for an evaluation study of consumer education for low-income families, and a survey of migratory labor in

[4] For additional information about the projects related to dependency and poverty, see Burchinal, Lee G.: "Cooperative Research and Demonstration Projects on Poverty and Dependency," Welfare in Review, December 1963, pp. 12-17.

Wisconsin, including sources and amounts of income and the degree of income protection.

The "administrative process and use of professional manpower" category includes a study of different ways of organizing and utilizing public assistance personnel, an analysis of intercountry welfare services, and a study of social work as a career, based on the plans and experiences of America's 1961 college graduates.

Studies of medical services and costs include two investigations of patient care needs in nursing homes in relation to sources of support and an investigation of the effects of income in expenditures for health services.

Each of the three studies related to "demography, community organization, and urban problems" focuses on a different topic: an investigation of social aspects of urban renewal; determinants of geographic mobility of labor; and a community development project organized by the Wisconsin Winnebago Indians.

Future Plans

Welfare Administration plans for the program are guided by two main objectives:

1. To contribute to the development of tested knowledge and its application to community programs designed to reduce poverty and dependency, especially those programs involving social services.
2. To maintain a balanced program of research-demonstration activities covering critical areas and reflecting emerging issues and problems in the field of social welfare in the United States.

In the immediate future several lines of development are planned: first, to continue and strengthen certain present operating procedures; second, to encourage greater activity along selected lines of project development.

EXTENSION OF OPERATING PROCEDURES

Staff are now available in the Division of Research to begin to develop an expanded intramural research program within the Welfare Administration. Research and demonstration projects supported under the Cooperative Research and Demonstration Grants Program increasingly will be used to supplement and extend the intramural research program of the Welfare Administration. In this context, consultation provided to potential applicants and to project directors can contribute both to the research goals of the applicant and to the development of firm knowledge and tested practice needed for evaluating national policies. Several guiding principles will be used in this process:

1. The consulting role, referred to a number of times in this discussion, will be expanded as more areas of specialization are represented among the staff in the Division of Research. Ideas and developments will flow both ways, benefiting both extramural projects and the intramural research program.
2. Efforts will be made to develop cooperative relationships among research and program specialists in university departments, schools of social work, State or city departments of welfare, and voluntary agencies to undertake needed studies and demonstrations. Staff in the Division of Research will attempt to develop such relationships through its work on applications made to the grants program.
3. Efforts will be made to develop clusters of substantively interrelated projects with planned replication and systematic variations in designs. Already one project to be undertaken among persons approaching retirement age in Baltimore and a similar statewide sample of persons in Iowa include measures for some of the same variables. Replication in these two studies was developed through the Research Grants Branch. Similar developments are contemplated in relation to studies of characteristics of youth from socially and culturally disadvantaged homes and for the assesment of attitudes, potentials, aspirations, and other characteristics of members of chronically dependent families. By arranging communication among project directors working in closely related areas,

we hope to encourage quick implementation of results obtained in other studies and to contribute to a more rapid accumulation of reliable generalizations.

4. While continuing research into possible causes and correlates of poverty, dependency, and low economic status, increased emphasis will be given to the development of demonstration projects that promise to provide critical tests of ways of improving or expanding social welfare services. Demonstration projects should meet four criteria: each should provide for careful tests of services needed by special categories of persons; each should contain several experimental or treatment programs so that the demonstration is not a test of something versus nothing but rather an assessment of the relative effectiveness of several intervention strategies; each must have a rigorous evaluation design built into the treatment program; and each demonstration should be designed so that if successful results are obtained, these can be applied to the best of ongoing programs, preferably those in public welfare departments. For this reason, it is doubtful if most demonstrations which require full staffs of generally scarce personnel, such as professionally trained social workers, or for which the costs of implementation are far beyond current operating budgets of most private or public agencies will be supported. In unusual circumstances, the last limitation may be relaxed.

AREAS OF SUBSTANTIVE INTEREST

At any time, any proposal consistent with the broad legislative authorization of the program may be submitted. At present, however, research knowledge is needed in relation to a number of problems confronting the Welfare Administration. Areas for which research or demonstration proposals are desired include the following:

1. Tests of the effectiveness of provisions of the 1962 Public Welfare Amendments which permit increased rehabilitation services to prevent or reduce poverty and dependency and to encourage self-support. What types of services have had the greatest impact for rehabilitation of public assistance cases, particularly AFDC cases? What coordination or combination of public and private services are needed to help AFDC and other types of public assistance families become economically self-sufficient? In the long-term interests of the children and families involved, what types of families should be helped to improve their social functioning but for the immediate period will be helped most by remaining on public assistance rather than having the mother become employed?

2. Research on the needs of public assistance families and the kinds of needs that are met and are unmet by present levels of support and kinds of welfare services provided. To what extent do relatively inadequate AFDC welfare payments impede rehabilitation and achievement of independence by welfare families? What impact do low welfare payments have upon the development of children and youth in these families? How can parents in low-income families be aided in making better use of credit, preparing more nutritious meals, improving housing, obtaining the best clothing possible, and, in short, obtaining as high a level of living as possible within the limits of their income? In addition to increasing the percentage of need met through AFDC, what other program improvements would contribute to increasing the employment potential of welfare recipients? What proportion of adults in public assistance families are trainable and can be helped to secure employment? What are the reactions of persons included in community work and training programs to the opportunities extended by these programs? What are the roles of fathers in families receiving assistance and those in which the fathers are engaged in community work and training projects? How are families benefited by these programs? Their communities? How could these programs be made more effective in contributing toward the self-sufficiency of individuals and more beneficial for their families and communities?

3. Research on the paths into and out

of dependency and identification of groups having a high risk of becoming dependent. By what series of routes or events do different types of families become dependent upon public assistance? How do low-income, but reasonably self-sufficient, families differ from those receiving public assistance? What factors are related to different kinds of adaptation to being poor? What factors contribute to the chronic dependency cycle? What part is played by mental retardation, alcoholism, untreated disabilities, poor education, social and cultural deprivation, race, and other factors? Given the identification of dependency-prone families, what services could help them reverse their downward trend and move toward social and economic self-sufficiency?

4. Projects leading to the development of tested alternative uses of professional manpower. What are the most efficient uses of scarce manpower to help families improve their social and economic functioning? What kinds of in-service training programs best prepare nonprofessionally trained persons for different kinds of social work roles? What are the roles and subroles performed in carrying out various social welfare functions? What levels of training and experience are necessary for performing different roles effectively? What administrative arrangements, including the organization of caseworkers, assignment of tasks, integration of functions, types of supervision, and location of offices relative to clients produce the most effective and efficient net of services?

5. Exploration of new roles for public assistance workers. What results may be obtained from developing community organization and expanded group work roles for meeting needs of public assistance clients? How can the activities of group workers and community organization specialists be integrated best with other welfare services?

6. Assessment of ways in which public and private agencies can better coordinate services to help special categories of the needy. What problems exist in relation to planning for coordination of services among public and private welfare agencies? What kinds of area-based plans for coordination and development of services are needed for sparsely settled rural areas, small towns, suburbs, and metropolitan areas? At present, what groups are not reached by any services? What could be done to reduce unnecessary overlapping of services?

7. Development of better understanding of the effects of social and cultural deprivation upon children and youth and how these youth can be helped to discover and develop their potentials for education and training, expand their occupational perspectives, and utilize opportunities. What are the cumulative effects of social and cultural deprivation on youth in different regions of the country, in rural as well as urban areas, among whites, Negroes, Indians, Spanish-Americans, and youth from other minority groups? How can these youth be guided to prepare for adult lives as responsible workers and constructive citizens? What are the paths out of poverty and dependency now available to these youth? What paths are being used by different groups of youth? How can additional escape routes from poverty and dependency be opened to them? How can public welfare agencies best help AFDC mothers contribute to the educational and social development of their children and prepare their children for adult employment? What kinds of cooperative relationships can be established among dependent families and their children and social welfare and school personnel?

8. Development of evaluation techniques and standardized procedures for demonstration projects so that results can be made cumulative, can be generalized, and made more useful. What critical concepts are necessary for better understanding chronic dependency and for ascertaining changes in family functioning as a result of social work treatment programs? What scales or other measuring devices should be developed for measuring these critical variables? What are some of the basic components and

substantive areas that should be included in the evaluation of demonstrations designed to improve the social and economic functioning of dependent families?

9. More accurate measurements of unit cost of providing services and for evaluating different kinds of service. What are the actual operating unit costs for providing various kinds of services to clients? How much change or movement in clients or families is obtained per unit cost for different kinds of services? By the criterion of dollars spent per unit cost, what kinds of services or combination of services produce the largest unit rates of change or movement?

Reliable answers to these and related questions are critically needed. We do not have to be reminded of the immensity of social problems confronting our society. All indications are that demands for services will continue to run far ahead of available personnel and resources. Research offers a powerful means for developing and testing more efficient ways of providing services and for contributing to a richer and fuller life for many Americans. Research and demonstration projects are needed now to help chart the ways to serve American society best in the coming decades. The Cooperative Research and Demonstration Grants Program offers opportunities for voluntary and public agencies, universities, and other research organizations to contribute to these objectives.

Advisory Council on Public Welfare

In July a 12-member Advisory Council on Public Welfare was appointed by the Secretary of Health, Education, and Welfare to review the public assistance and child welfare programs for which Federal funds are appropriated under provisions of the Social Security Act. Appointment of the council was provided for in the 1962 amendments to the Social Security Act.

Members of the council are:

Fedele Fauri, Dean, School of Social Work, University of Michigan, Ann Arbor, Chairman.

Mrs. De Leslie Allen, Vice Chairman, Department of Social Welfare, National Council of Churches, Rochester, N.Y.

Walter E. Brown, M.D., Glass-Nelson Clinic, Tulsa, Okla.

James W. Fogarty, Executive Director, Community Council of Greater New York, New York City.

Mrs. Cernoria D. Johnson, Director, Washington Bureau, National Urban League, Inc., Washington, D.C.

Guy R. Justis, Director, American Public Welfare Association, Chicago.

Leonard Lesser, Assistant to the President, Industrial Union Department, AFL-CIO, Washington, D.C.

C. Virgil Martin, President, Carson Pirie Scott & Company, Chicago.

Frank W. Newgent, Director, Division for Children and Youth, State Department of Public Welfare, Madison, Wis.

Eugene Nickerson, County Executive for Nassau County, County Executive Building, Mineola, Long Island, N.Y.

Sanford Solender, Executive Vice President, National Jewish Welfare Board, New York City.

Elizabeth Wickenden, Social Welfare Consultant, New York City.

The U.S. Commissioner of Welfare, Dr. Ellen Winston, is executive officer of the council.

The council, which held its first meeting July 23-24, is required by law to complete its work and make a report to the Secretary of Health, Education, and Welfare no later than July 1, 1966.

The purpose of the council, as designated in the 1962 amendments, is to review the status of the Federal-State welfare programs and to make recommendations, particularly "with respect to the fiscal capacities of the States and the Federal government and with respect to any other matters bearing on the amount and proportion of the Federal and State shares."

Cooperative Research and Demonstration Reports*

UNWED MOTHERHOOD: PERSONAL AND SOCIAL CONSEQUENCES

The antecedents and the consequences of unwed motherhood were explored in this project conducted under the auspices of the Institute for Research in Social Science at the University of North Carolina and directed by Dr. Charles E. Bowerman with Drs. Donald P. Irish and Hallowell Pope.

The main topics of interest were the norms and values, self-perceptions, and subsequent social experiences of unwed mothers; their associations with and attitudes toward the alleged fathers; the differences between mothers who give birth to one nonwedlock child and those who give birth to more than one; and the significance of racial and class status in relation to unwed motherhood. The present somewhat preliminary-report gives less clearcut findings on the first three topics than on the others.

Four interrelated but separate studies were undertaken:

1. Field research. For this, the major segment of the project, about 1,100 unwed mothers (620 Negro and 477 white) were interviewed in 35 counties of North Carolina during June and July of 1962. For actual analysis, 939 interviews were used. The great majority of the respondents were described as coming from "blue collar" homes.

2. Physicians' study. Physicians filled out and submitted questionnaires on 414 premaritally pregnant private patients, Negro and white, in 70 counties of the State from mid-March to mid-September, 1962. Respondents were described as predominantly upper-lower, lower-middle, and middle class. The socioeconomic status of the Negroes averaged lower than that of the whites, and that of the primiparae averaged higher than that of the multiparae.

3. Maternity home inquiry. Project staff members conducted two-stage interviews with 80 white residents of two maternity homes, during the spring and summer of 1962. For actual analysis, interviews of 58 residents were used. Respondents were all white, mostly single, mostly primiparae, and described as "lower-middle class, working class, and upper-lower class girls."

4. Ecological-demographic study. Data from the State board of health were supplemented by information gleaned from the Census and other sources. Although not separately reported, the findings from this study obviously contribute background to the other three.

The field research represents a followup of women who were unwed at the time of conception and had given birth to a child from 6 months to 2-1/2 years before the interview was held. The physicians' study and maternity home inquiry obtained data before the child was born. Differences in results among these three segments of the project may be ascribed to difference before-and-after, to difference in the samples, or to difference in methods of obtaining the information. Convergences, on the other hand, represent convergence overriding such variations.

To a considerable extent, the findings from all three segments of the project support and amplify the findings of other investigators, although some are at odds with earlier findings and with assumptions current among the public. No support is given, for example, to the idea that most unwed mothers are promiscuous. On the contrary, a large majority in the field study say either that they had been in love or had thought they were in love with the alleged father.

*Based on reports from projects aided by the Cooperative Research and Demonstration Grants Program administered by the Welfare Administration with the cooperation of the Social Security Administration. Requests for further information on these studies should be directed to the project directors.

This is true of a smaller proportion (42 percent) of women in the maternity home study, a difference that may be ascribed to time, to sample, or to type of interview. The investigators found, as have others, that the unmarried mother and father tended to be similar in age, education, and socioeconomic background, suggesting that the relationship is not necessarily exploitative. Both interstudy and intrastudy comparisons bring out the extent to which attitudes change during and after pregnancy and the extent to which study reports about unmarried mothers may be influenced by the point in time at which they are interviewed.

As usual, the Negro nonwedlock child is reported much less likely to be adopted than the white nonwedlock child. Less familiar is the finding in the followup study that almost half of the white unmarried mothers were still single and had their children with them; two-thirds of the white "recidivists" were in this situation. The proportions were higher among the Negro primiparae (73 percent) and multiparae (84 percent). Nevertheless, it is striking that not quite one-third of the white primiparae (31 percent) had placed their children in adoption. Since it is estimated that about 70 percent of all white nonwedlock children are adopted, these figures are probably related to the socioeconomic status of the sample. Barely over 1 percent of the Negro children were placed in adoption, although the national estimate for all Negro nonwedlock children is between 5 and 10 percent. The figures for both groups serve as a reminder that overall national estimates mask wide variations and that whether a nonwedlock child is kept or placed does not depend solely on ethnic status.

Among the most interesting findings are those relating to postnatal relationships between the unwed parents. One-quarter of the white women but less than one-sixth of the Negro women were married after the birth of the child but before the time of the field interview. The white women who married after the birth of the child were much more likely to marry some man other than the alleged father; most of the Negro women who married, married the alleged father. The authors infer that the white women married their sex partners more often than did the Negro women, but that when they did so, they were likely to marry before the child was born. The Negroes, on the other hand, married the sex partner less often but, when they did so, they were more likely than the whites to marry after the child was born.

These findings, they note, must be interpreted in the light of those produced by a variety of other investigations, as well as the findings of the physicians' study in the present project. In the latter, 22 percent of the premaritally pregnant white women, as compared with 3 percent of the Negro women, married before the birth of the baby. A number of social pressures and cultural patterns combine to produce this difference. Some of them are illumined by the work of Hylan Lewis, John Rohrer, Hyman Rodman, Clark Vincent, and Judith Blake, among others.

Among the Negroes, the man more often wanted marriage while the woman did not; among the whites, the woman more often wanted marriage while the man did not. These and related findings deserve a good deal of study, in themselves and in relation to other studies. As the authors point out, there may be "a desire to become married but an unwillingness to contract a particular marriage."

The very condensed report of the maternity home interviews gives reason to hope for a more complete account, especially of attitudes toward premarital sex norms. The early refusal of unmarried girls to accept the fact of pregnancy is in line with findings of other investigations. Less familiar is the reported expectation among a majority of these unmarried mothers that "one mistake" will not jeopardize their chances of making a good marriage and will not overshadow the rest of their lives. In this view they appear somewhat more optimistic than respondents in the physicians' study.

In some respects this threefold project is a model of method. For instance, there is the effort at the outset to review relevant research already done and to profit by its findings. Another example is the scrupulous report on limitations such as are bound to exist in any research project. And still another is the active and unremitting effort to maintain reliability in coding. Proponents of intensive interviewing may feel that less adequate recognition is given--despite careful interviewer evaluations and exit interviews--to the limitations and hazards of the kinds of oral and written interviews employed, especially with so sensitive a subject and one so liable to self-deception on the part of the respondent.

The conscientious reporting of limitations leads the reader to share in the investigators' regret that they exist. One major limitation concerns the physicians' study. It is clear that the effort to get information about white unmarried mothers from the more privileged socioeconomic levels did not succeed. One can only conclude, just as the investigators observe, that "the most inaccessible cases, those very difficult to identify and contact, have eluded us as they have others."

The investigators are continuing more exhaustive and refined analyses of the data under a recently approved grant from the Cooperative Research and Demonstration Grants Program.

--Elizabeth Herzog,
Children's Bureau

Correction

In the article "Determining Financial Eligibility for Medical Assistance for the Aged" in the June issue, the following corrections should be noted: In table 1, page 13, in the columns for physician services, the entries for Pennsylvania should read "not provided," rather than "$125.00." In table 2 on page 15, the entries for Pennsylvania should report relatives' responsibility for medical payments as totaling $90 instead of $180 as stated. (Since the period covered by table 2, Pennsylvania has eliminated the relatives' responsibility requirement.)

Child Welfare Research and Demonstration Grants Awarded in July

Grants totaling $1,162,926 for 21 studies and experimental programs were awarded in July under the Child Welfare Research and Demonstration Grants Program of the Children's Bureau. Basic goals which these projects are intended to further are:

1. A way for the deprived child to enter school on a more nearly equal basis with middle-class children.
2. A stable future for emotionally disturbed adolescents.
3. Ways to stem the separation of child from family.
4. Better care when separation is necessary between child and family.
5. Better legislation to protect the "battered child."
6. Knowledge about the legal rights of mentally retarded and disturbed children.
7. School-centered rehabilitation for pregnant high school girls.
8. Growth-promoting recreation facilities for chronically disabled children.
9. A fuller understanding of attitudes toward juvenile delinquents.
10. Better understanding of the main legal problems facing child welfare agencies.

The University of Chicago received $57,406 to continue an environmental study of preschool children, many of whom are functioning at a mentally retarded level, to find out how economic and cultural deprivation affects their mental growth. Director of the study is Robert D. Hess.

The Jewish Vocational Service in Chicago received $36,900 to continue a demonstration project incorporating vocational planning in the treatment programs for emotionally disturbed adolescents who are living in residental treatment centers, group care homes, and individual foster homes. Project director is William Gellman.

The University of Southern California in Los Angeles received $13,109 to continue an interview study of some 1,000 people to assess the conflicting attitudes of parents, police, probation and parole officers, teachers, and social workers in preventing and treating juvenile delinquency. Director of the study is A. W. McEachern.

Bryn Mawr College in Bryn Mawr, Pa., received $39,720 to continue a followup study of some 200 adoption placements made by the Children's Aid Society of Pennsylvania from 1950 to 1957. Director of the study is Edmund V. Mech.

The District of Columbia Public Schools and the District of Columbia Departments of Public Health and Public Welfare received $86,200 to continue a program demonstrating the value of cooperative interagency action to meet the educational, social, physical, and mental health needs of pregnant school-age girls. Director of the program is Elizabeth M. Goodman.

The Camp Fire Girls, Inc., in New York City received $62,385 for an action-research program in Boston, Detroit, and Washington, D.C., to bring about high-caliber social leadership for school girls in metropolitan areas. Special attention will be given to the needs of girls who display evidence of retardation in mental growth. Director of the program is Patricia Keith.

The Kentucky Department of Child Welfare received $42,480 for an experimental day care program which will involve the families of children receiving care and attempt to raise the psychosocial, cultural, and intellectual performance levels of children prior to their entrance in public schools. Director of the program is Rita McMahon.

The Rhode Island Department of Social Welfare in Providence received $46,800 to assess the feasibility of in-

corporating day care services as an integral part of the State's public assistance program. Project director is John J. Affleck.

Columbia University in New York City received $36,923 to assess the status of legislation throughout the States for protection of children abused by their parents or caretakers. Project director is Monrad G. Paulsen.

The Jewish Board of Guardians in New York City received $40,680 to begin research into the possibilities of avoiding total separation of a child from his family. Director of the research project is Herschel Alt.

The University of Chicago received $41,917 to begin study of factors involved in separating a child from his own family and providing him with foster care. Director of the study is Lillian Ripple.

The University of California in Berkeley received $78,991 to develop a brief in support of the thesis that the institutionalized mentally retarded child has a legal right to therapy and treatment in accordance with sound prevailing medical norms. Director of the project is David W. Louisell.

The Child Welfare League of America in New York City received $125,112 to begin work toward innovations in long-term care arrangements for children away from their own homes. Project director is Bernice Boehm.

The University of Chicago Center for Urban Studies received $161,542 to evaluate the physical and functional obsolescence of the facilities used in providing group care by child welfare agencies throughout the country. Project director is Jack Meltzer.

Columbia University in New York City received $36,157 to produce a synthesis of the main legal problems confronting child welfare agencies. Project director is Monrad G. Paulsen.

The Wisconsin State Department of Public Welfare received $41,443 to continue testing criteria for choosing foster families for emotionally disturbed children of elementary school age. Director of the project is Patricia W. Cautley.

The University of Chicago received $45,931 to develop a methodology for evaluative research in child welfare. Project director is Mary E. Macdonald.

Columbia University in New York City received $52,200 to work toward innovations in services for the long-term care of minority group children and children of poverty-stricken families. Director of the project is David Fanshel.

Comeback, Inc., in New York City received $44,550 for a study of availability and utilization of growth-promoting recreation facilities for mentally and physically disabled children in the United States. Director of the study is John E. Silson.

The Washington Center for Metropolitan Studies in Washington, D.C., received $23,160 for a critical analysis of the legal protections and authoritative controls for children suffering from mental disorders in the District of Columbia. Director of the study is Gladys A. Harrison.

The Massachusetts Fund for Children and Youth, Inc., received $49,320 for a study of how families use community services to meet the health and welfare needs of children.

This is the sixth series of grants to nonprofit organizations under the Child Welfare Research and Demonstration Grants Program. Awards for applications received on or before July 1 will be announced in October. Deadlines for future applications will be November 1 and March 1, 1965, with awards announced in February and June.

Publications of Interest*

WELFARE ADMINISTRATION

CHARACTERISTICS OF STATE PUBLIC ASSISTANCE PLANS UNDER THE SOCIAL SECURITY ACT: STAFF DEVELOPMENT PROVISIONS. Public Assistance Report No. 51. Bureau of Family Services, 1964. 130 pp. $1. Describes provisions for staff development in each State.

DETERMINING FEES FOR DAY CARE SERVICES. Children's Bureau, 1964. 20 pp. 15 cents. Revised ed. Prepared in response to many requests from voluntary, public, and other nonprofit day care agencies for help in establishing equitable fees for day care.

PHENYLKETONURIA: DETECTION IN THE NEWBORN INFANT AS A ROUTINE HOSPITAL PROCEDURE. A Trial of a Phenylalanine Screening Method in 400,000 Infants. By Robert Guthrie and Stewart Whitney. Children's Bureau Publication 419. 1964. 73 pp. 30 cents. Describes the results of a field trial of an inhibition assay method for screening newborn infants for PKU prior to discharge from the hospital.

THE CLINICAL TEAM LOOKS AT PHENYLKETONURIA. Children's Bureau, 1964. Revised ed. 56 pp. 40 cents. Discusses problems of the disease from the viewpoints of the biochemist, pediatrician, medical social worker, public health nurse, psychologist, and nutritionist.

CHILDREN'S BUREAU PUBLICATIONS: AN INDEX TO PUBLICATIONS BY NUMBER, TITLE, AUTHOR, AND SUBJECT, 1912-MAY 1964. Children's Bureau, 1964. 60 pp. Limited edition.

THE OLDER FARM POPULATION, 1960-1963. By Herman B. Brotman. Office of Aging, June 1964. No. 8 in the "Facts on Aging" series. 2 pp. Describes population trends found in census data.

OTHER PUBLICATIONS

SOCIAL CHANGE: SOURCES, PATTERNS, AND CONSEQUENCES. Edited by Amitai and Eva Etzioni. Basic Books, New York, 1964. 503 pp. $6.95. Representative selection of 50 classic and contemporary writings on social change.

WORKING WITH COMMUNITIES. Edited by Raymond L. Clarke. National Council of Social Service, London, 1963. 88 pp. 6s. 6d. Study of community work in Great Britain, based upon a conference sponsored by the Society of Neighborhood Workers.

SCHOOL-HOME PARTNERSHIP IN DEPRESSED URBAN NEIGHBORHOODS. By Gene C. Fusco. Office of Education Bulletin No. 20. 1964. 74 pp. 40 cents. Practices to improve educational opportunities for disadvantaged school children and culturally deprived adults.

EDUCATION, MANPOWER, AND ECONOMIC GROWTH: STRATEGIES OF HUMAN RESOURCE DEVELOPMENT. By Frederick Harbison and Charles A. Myers. McGraw-Hill, New York, 1964. 229 pp. $7.50. How the course of development of modern nations may be influenced through planning.

IN THE MIDST OF PLENTY: THE POOR IN AMERICA. By Ben H. Bagdikian. Beacon Press, Boston, 1964. 207 pp. $4.50. First-hand reporting of the plight of America's poor.

PROBLEMS OF AMERICAN SOCIETY: VALUES IN CONFLICT. By John F. Cuber and others. 4th ed. Holt, New York, 1964. 422 pp. $5.75. Major part of text is new.

FAMILY FAILURE: A STUDY OF 129 FAMILIES WITH MULTIPLE PROBLEMS. By A. F. Philp. Faber, London, 1963. 311 pp. 32s. 6d. Results of long-term casework with the family as a whole by Family Service Units staff.

GROUP TREATMENT IN FAMILY SERVICE AGENCIES. Family Service Association of America, New York, 1964. 55 pp. $1.25. Guidelines to establishing group treatment programs. Prepared by FSAA committee under the chairmanship of Sanford N. Sherman.

BASIC ISSUES IN COORDINATING FAMILY AND CHILD WELFARE PROGRAMS. Edited by Charles P. Cella, Jr., and Rodney P. Lanc. University of Pennsylvania Press, Philadelphia, 1964. 121 pp. $3.50. Papers delivered at two seminars of the Fels Institute of Local and State Government represent a basic analysis of issues in the coordination of social welfare programs.

THE FEDERAL GOVERNMENT IN BEHAVIORAL SCIENCE: FIELDS, METHODS, AND FUNDS. Study directed by William W. Ellis. American Enterprise Institute for Public Policy Research, Washington, D.C., 1964. 43 pp. $2.

*U.S. Government publications for which prices are listed may be ordered from the Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402 (25 percent discount on lots of 100 or more). Inquiries or orders for other publications should be directed to the publisher or issuing agency.

Program and Operating Statistics

Public Assistance in May 1964

Roughly 100,000 fewer persons received aid under the six public assistance programs[1] in May than during the previous month. Declines occurred under all programs except medical assistance for the aged and aid to the permanently and totally disabled. Under the general assistance program the drop of 94,100 recipients, or 11.1 percent, was the largest proportional decline in more than 2 years. More than four-fifths of the States reported fewer general assistance recipients in May than in April.

For aid to families with dependent children (AFDC), the number of recipients decreased 8,400, or 0.2 percent, for the first decline in 8 months. In the unemployed-parent segment the decrease was 22,000, or 4.9 percent, with all participating States except Michigan and Ohio contributing to the decline. These two States initiated payments under this segment of the program in April. For other than the unemployed-parent segment of the program, the number of recipients increased 13,600, or 0.4 percent. There were slight declines in the numbers of old-age assistance and aid to the blind recipients.

The largest program increase, 4,600 recipients, or 2.6 percent, occurred in the total for the 35 States and other jurisdictions making payments under medical assistance for the aged. Two additional States, Nebraska and South Dakota, reported applications received for medical assistance for the aged during May but no payments were made. First payments in these two States are expected in June. Persons aided under aid to the permanently and totally disabled increased 3,500, with 44 States participating in the increase.

Changes in amounts paid for vendor medical care were responsible for most of the substantial changes in State average payments per recipient. Idaho reduced its AFDC payments by $1 per recipient. The State also assigned as much as possible of the payment for basic common needs to the adult category in combination cases of AFDC and an adult category. These changes resulted in a decrease of more than $5 in the average payment per family.

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[1]Data for specified types of assistance under State programs for aid to the aged, blind, or disabled or for such aid and medical assistance for the aged are classified with data for separate State programs for old-age assistance, aid to the blind, aid to the permanently and totally disabled, or medical assistance for the aged.

Table 1. Number of recipients of public assistance in the United States, by month, May 1963-May 1964 1/

[Except for general assistance, includes cases receiving only vendor payments for medical care]

Year and month	Old-age assistance 2/	Medical assistance for the aged 2/	Aid to the blind 2/	Aid to the permanently and totally disabled 2/	Aid to families with dependent children			General assistance 4/	
					Families	Total recipients 3/	Children	Cases	Recipients
	Number of recipients								
1963									
May	2,202,570	129,493	98,471	459,229	972,498	3,976,422	2,978,752	350,000	856,000
June	2,198,962	136,220	98,404	461,537	962,566	3,934,391	2,951,882	330,000	778,000
July	2,191,307	140,159	98,096	466,524	957,629	3,910,589	2,932,495	325,000	769,000
August	2,194,275	148,473	98,140	470,174	954,957	3,912,137	2,933,228	326,000	767,000
September	2,191,593	144,021	97,954	472,162	951,818	3,902,605	2,930,806	322,000	754,000
October	2,196,429	157,707	98,178	475,493	957,024	3,920,794	2,945,425	326,000	766,000
November	2,194,387	152,919	97,843	477,472	958,325	3,933,339	2,954,844	322,000	765,000
December	2,193,564	150,162	97,794	479,315	969,084	3,988,961	2,993,326	353,000	870,000
1964									
January	2,190,004	156,769	97,709	482,446	983,114	4,059,302	3,042,042	376,000	951,000
February	2,188,506	160,471	97,617	486,286	999,970	4,141,730	3,098,336	374,000	933,000
March	2,188,610	172,736	97,760	490,156	1,013,313	4,206,817	3,148,698	374,000	914,000
April	2,186,711	176,416	97,631	493,974	1,023,504	4,261,988	3,188,192	360,000	845,000
May	2,185,137	181,056	97,582	497,451	1,021,647	4,253,591	3,183,965	337,000	750,000
	Percentage change from previous month								
1963									
May	-0.4	+1.6	-0.1	+2.4	-0.5	-0.7	-0.6	-5.6	-8.9
June	-.2	+5.2	-.1	+.5	-1.0	-1.1	-.9	-5.7	-9.2
July	-.3	+2.9	-.3	+1.1	-.5	-.6	-.7	-1.5	-1.1
August	+.1	+5.9	(5/)	+.8	-.3	(5/)	(5/)	+.3	-.3
September	-.1	-3.0	-.2	+.4	-.3	-.2	-.1	-1.2	-1.7
October	+.2	+9.5	+.2	+.7	+.5	+.5	+.5	+1.5	+1.5
November	-.1	-3.0	-.3	+.4	+.1	+.3	+.3	-1.1	+.3
December	(6/)	-1.8	-.1	+.4	+1.1	+1.4	+1.3	+9.6	+13.7
1964									
January	-.2	+4.4	-.1	+.7	+1.4	+2.0	+1.6	+6.5	+9.3
February	-.1	+2.4	-.1	+.8	+1.7	+2.0	+1.8	-.7	-2.1
March	(5/)	+7.6	+.1	+.8	+1.3	+1.6	+1.6	(6/)	-2.0
April	-.1	+2.1	-.1	+.8	+1.0	+1.3	+1.3	-3.7	-7.5
May	-.1	+2.6	-.1	+.7	-.2	-.2	-.1	-6.4	-11.1

1/ All data subject to revision. 2/ Represents data for recipients of the specified type of assistance under separate State programs and under State programs for aid to the aged, blind, or disabled or for such aid and medical assistance for the aged. 3/ Includes as recipients the children and 1 or both parents or 1 caretaker relative other than a parent in families in which the requirements of at least 1 such adult were considered in determining the amount of assistance. 4/ Partly estimated. Excludes Idaho and Indiana for all months and Nebraska beginning November 1963; data not available. 5/ Increase of less than 0.05 percent. 6/ Decrease of less than 0.05 percent.

Table 2. Amount of public assistance payments in the United States, by month, May 1963-May 1964 1/

[Except for general assistance, includes vendor payments for medical care]

Year and month	Total 2/	Old-age assistance 3/	Medical assistance for the aged 3/	Aid to the blind 3/	Aid to the permanently and totally disabled 3/	Aid to families with dependent children	General assistance 4/
	Amount of assistance						
1963							
May	$399,392,000	$171,464,001	$28,870,692	$8,049,211	$34,529,977	$124,204,346	$23,215,000
June	390,918,000	169,395,345	26,592,866	8,040,888	34,522,707	121,770,120	21,298,000
July	390,482,000	168,081,430	28,426,914	8,043,679	35,105,811	120,616,307	21,397,000
August	391,217,000	167,109,786	29,642,387	8,009,157	35,424,031	121,184,131	21,350,000
September	391,487,000	168,441,224	28,202,295	7,972,555	35,667,016	121,842,043	21,112,000
October	399,662,000	169,526,665	31,851,824	8,109,060	36,287,194	123,437,104	21,728,000
November	393,541,000	168,016,864	28,966,274	7,990,500	35,943,882	122,804,815	21,241,000
December	402,553,000	168,979,916	30,212,901	8,021,730	36,301,352	126,649,272	23,996,000
1964							
January	407,263,000	168,975,680	30,929,987	8,013,048	36,599,609	128,918,392	25,664,000
February	414,663,000	171,345,730	31,757,790	8,076,895	37,336,550	132,718,951	24,986,000
March	424,754,000	172,520,773	34,679,610	8,140,935	38,241,308	136,836,208	25,155,000
April	427,747,000	171,440,998	36,532,021	8,167,521	38,683,146	139,562,947	24,062,000
May	422,759,000	171,192,802	35,219,429	8,200,759	38,975,943	138,444,208	21,846,000
	Percentage change from previous month						
1963							
May	+0.1	+0.5	+9.2	+0.1	+1.3	-1.1	-8.1
June	-2.1	-1.2	-7.9	-.1	(5/)	-2.0	-8.3
July	-.1	-.8	+6.9	(6/)	+1.7	-.9	+.5
August	+.2	-.6	+4.3	-.4	+.9	+.5	-.2
September	+.1	+.8	-4.9	-.5	+.7	+.5	-1.1
October	+2.1	+.6	+12.9	+1.7	+1.7	+1.3	+2.9
November	-1.5	-.9	-9.1	-1.5	-.9	-.5	-2.2
December	+2.3	+.6	+4.3	+.4	+1.0	+3.1	+13.0
1964							
January	+1.2	(5/)	+2.4	-.1	+.8	+1.8	+7.0
February	+1.8	+1.4	+2.7	+.8	+2.0	+2.9	-2.6
March	+2.4	+.7	+9.2	+.8	+2.4	+3.1	+.7
April	+.7	-.6	+5.3	+.3	+1.2	+2.0	-4.3
May	-1.2	-.1	-3.6	+.4	+.8	-.8	-9.2

1/ All data subject to revision. 2/ Total exceeds sum of columns because of inclusion of vendor payments for medical care from general assistance funds and from special medical funds; data for such expenditures partly estimated for some States. 3/ Represents data for payments to recipients of the specified type of assistance under separate State programs and under State programs for aid to the aged, blind, or disabled or for such aid and medical assistance for the aged. 4/ Partly estimated. Excludes Idaho and Indiana for all months and Nebraska beginning November 1963; data not available. 5/ Decrease of less than 0.05 percent. 6/ Increase of less than 0.05 percent.

Table 3. Old-age assistance: Recipients and payments to recipients, by State, May 1964 1/

[Includes vendor payments for medical care and cases receiving only such payments]

State	Number of recipients	Payments to recipients		Percentage change from--			
		Total amount	Average	April 1964 in--		May 1963 in--	
				Number	Amount	Number	Amount
Total 2/	2,185,137	$171,192,802	$78.34	-0.1	-0.1	-0.8	-0.2
Ala.	110,015	7,481,505	68.00	+.4	+.2	+4.0	+1.9
Alaska 3/	1,385	4/ 128,419	92.72	-.1	+12.4	+.1	+12.1
Ariz.	13,286	827,107	62.25	-.5	-1.9	-.6	(5/)
Ark.	58,019	3,691,776	63.63	+.3	+3.4	+2.0	-3.1
Calif.	273,681	29,700,887	108.52	+.5	+.7	+3.4	+4.2
Colo. 2/	48,898	4,971,949	101.68	-.2	+.5	-.8	-5.5
Conn.	7,721	570,330	73.87	-2.7	-19.9	-13.2	-21.5
Del.	1,255	88,032	70.15	+1.7	+.1	+15.7	+23.2
Dist. of Col.	2,387	206,998	86.72	-.1	+2.6	-11.8	-21.9
Fla. 3/	71,741	4,822,468	67.22	+.2	+1.5	+1.5	+8.4
Ga.	91,918	5,203,832	56.61	+.1	+1.8	-.3	+5.0
Guam 6/	166	5,021	30.25	---	---	---	---
Hawaii 3/	1,158	94,309	81.44	+.9	+23.1	-.5	+19.0
Idaho	4,707	341,385	72.53	-1.2	-1.5	-11.2	-15.3
Ill. 3/	58,667	5,178,607	88.27	-.4	-.1	-5.9	-3.9
Ind.	23,209	1,850,897	79.75	(7/)	-.5	-4.1	+.1
Iowa	28,800	2,659,120	92.33	-.6	+2.5	-4.6	-2.2
Kans.	22,029	1,722,411	78.19	-.6	-6.0	-10.7	-22.8
Ky. 3/	56,732	3,562,349	62.79	+.5	+1.5	+5.5	+3.9
La.	130,155	11,065,321	85.02	+.1	+.3	+1.6	+2.2
Maine 3/	11,146	936,996	84.07	-.2	-.2	-.8	+6.1
Md. 3/	9,510	691,906	72.76	+.1	(7/)	+1.7	+3.1
Mass.	54,650	4,932,259	90.25	-.3	-2.1	-4.1	-.3
Mich.	49,881	4,243,562	85.07	-.3	-.1	-2.0	+5.6
Minn.	43,081	4,924,255	114.30	-.1	+2.5	-.9	+4.0
Miss.	74,248	2,890,298	38.93	-.2	-.7	-3.1	+8.3
Mo.	103,702	6,946,062	66.98	-.1	-.1	-2.1	(5/)
Mont.	5,480	394,490	71.99	-1.5	-1.4	-5.9	-1.1
Nebr.	12,636	1,148,750	90.91	(5/)	+1.0	-2.3	+10.4
Nev.	2,556	228,675	89.47	(5/)	+.5	+.7	-.2
N. H.	4,430	446,476	100.78	-.8	-1.0	-3.8	-3.6
N. J.	13,959	1,116,269	79.97	-.2	-.4	-24.5	-36.9
N. Mex. 3/	10,800	799,137	73.99	+.1	-.2	+.7	-7.5
N. Y.	56,283	5,202,529	92.44	-.3	-1.7	(5/)	+1.5
N. C.	43,615	2,570,052	58.93	-.2	-.4	-2.1	+2.3
N. Dak.	5,430	499,936	92.07	-.4	+7.9	-6.2	-6.5
Ohio	84,293	7,235,655	85.84	-1.2	-.4	-1.6	+.9
Okla. 3/	83,410	7,981,231	95.69	(7/)	-.2	-.5	+3.7
Oreg.	11,195	765,376	68.37	-1.5	-.8	-25.9	-40.1
Pa.	46,929	3,445,543	73.42	-.3	-5.2	-3.4	-9.5
P. R.	32,366	297,254	9.18	-.6	-1.7	-6.1	-6.4
R. I. 3/	5,963	506,877	85.00	-.1	-.2	-1.5	+.4
S. C.	26,196	1,369,504	52.28	-.5	-5.0	-3.4	+5.6
S. Dak.	7,267	611,385	84.13	-.7	+1.5	-5.5	-2.2
Tenn.	45,804	2,428,891	53.03	-.2	+1.3	-4.8	+5.1
Tex.	229,319	16,050,168	69.99	+.1	(7/)	+2.2	+1.9
Utah	5,093	348,080	68.34	-.5	-5.0	-7.5	-9.9
Vt. 3/	5,443	463,675	85.19	-.3	+.4	-.5	+.6
V. I.	467	16,051	34.37	-1.5	-.9	-6.4	-11.3
Va.	13,434	835,909	62.22	(5/)	+.4	-1.1	+2.8
Wash.	33,832	2,648,926	78.30	-.7	-8.8	-2.6	-32.0
W. Va.	14,687	721,612	49.13	-.7	-.9	-5.8	-1.5
Wis.	29,557	3,105,631	105.07	-.2	-1.1	-3.3	-.1
Wyo.	2,546	216,659	85.10	-.1	(7/)	-3.0	-4.3

1/ All data subject to revision. 2/ Includes 3,787 recipients aged 60-64 in Colorado and payments of $332,517 to these recipients. Such payments were made without Federal participation. 3/ Represents aid to the aged under program for aid to the aged, blind, or disabled, or for such aid and medical assistance for the aged. 4/ In addition, supplemental payments of $24,700 from general assistance funds were made to 38 recipients. 5/ Increase of less than 0.05 percent. 6/ Data for March; data for April and May not available. 7/ Decrease of less than 0.05 percent.

Table 4. Medical assistance for the aged: Recipients and payments for recipients, by State, May 1964 1/

State	Number of recipients 2/	Payments for recipients		Percentage change from April 1964	
		Total amount	Average	Number	Amount
Total.....	181,056	$35,219,429	$194.52	+2.6	-3.6
Ala.....	258	69,324	268.70	-.4	-3.9
Ark.....	2,454	137,094	55.87	-3.7	+6.8
Calif.....	27,811	7,990,328	287.31	+3.0	+.2
Conn.....	5,952	3/ 1,093,257	183.68	-1.3	-16.1
Dist. of Col.....	735	302,196	411.15	+137.9	+222.1
Fla. 4/.....	621	238,298	383.73	+22.0	+20.6
Guam 5/.....	130	2,276	17.51	---	---
Hawaii 4/.....	506	157,654	311.57	+1.2	+20.7
Idaho.....	1,926	245,126	127.27	+2.4	-2.4
Ill. 4/.....	549	169,988	309.63	-44.3	-62.6
Iowa.....	3,003	379,640	126.42	+22.7	+32.0
Kans.....	2,145	3/ 332,673	155.09	+11.6	+6.7
Ky. 4/.....	8,319	267,232	32.12	+20.3	+12.8
La.....	534	94,646	177.24	-7.3	-22.2
Maine 4/.....	405	97,981	241.93	-9.8	-11.0
Md. 4/.....	10,335	320,910	31.05	+.8	-12.1
Mass.....	26,562	3/ 4,274,823	160.94	+2.4	-5.1
Mich.....	5,511	1,937,462	351.56	+4.9	-.3
N. H.....	1,184	72,497	61.23	+3.0	+35.1
N. J.....	5,003	3/ 1,053,786	210.63	-3.0	-17.5
N. Y.....	33,848	3/ 10,757,600	317.82	-2.0	-4.6
N. Dak.....	6/ 1,122	3/ 256,404	228.52	+6.8	+11.5
Okla. 4/.....	1,118	179,439	160.50	+10.3	+17.3
Oreg.....	3,423	463,413	135.38	-3.4	-8.5
Pa.....	8,167	1,889,240	231.33	-.2	-5.0
P. R.....	3,133	102,466	32.71	-8.4	+4.4
S. C.....	1,193	201,468	168.88	+10.3	-8.7
Tenn.....	4,699	218,255	46.45	-6.9	-12.8
Utah.....	2,111	234,160	110.92	-1.4	-6.8
Vt. 4/.....	123	30,245	245.89	-8.2	-3.9
V. I.....	64	1,394	21.78	-51.1	-56.8
Va.....	843	120,138	142.51	+41.4	+12.3
Wash.....	9,290	1,333,006	143.49	-6.5	-6.6
W. Va.....	7,964	186,719	23.45	+49.0	+15.9
Wyo.....	15	8,291	(7/)	(7/)	(7/)

1/ All data subject to revision. 2/ Persons for whom vendor payments were made during the report month. 3/ Includes money payments not subject to Federal participation as follows: $920 in Connecticut, $11,084 in Kansas, $97,253 in Massachusetts, $9,674 in New Jersey, $53,551 in New York, and $2,275 in North Dakota. 4/ Represents medical assistance for the aged under program for aid to the aged, blind, or disabled and medical assistance for the aged. 5/ Data for March; data for April and May not available. 6/ Includes an unknown number of cases receiving only money payments. 7/ Average payment not computed on base of fewer than 50 recipients; percentage change on fewer than 100 recipients.

Table 5. Aid to the blind: Recipients and payments to recipients, by State, May 1964 1/

[Includes vendor payments for medical care and cases receiving only such payments]

State	Number of recipients	Payments to recipients		Percentage change from--			
		Total amount	Average	April 1964 in--		May 1963 in--	
				Number	Amount	Number	Amount
Total 2/	97,582	$8,200,759	$84.04	-0.1	+0.4	-0.9	+1.9
Ala.	1,750	108,072	61.76	+.6	+7.5	+3.8	+33.1
Alaska 3/	105	8,087	77.02	0	+.7	-2.8	+2.3
Ariz.	832	60,290	72.46	+.5	+.6	-2.9	-3.6
Ark.	1,968	137,114	69.67	-.5	+3.4	-.9	+.7
Calif. 2/	12,514	1,650,750	131.91	-.3	+.9	+1.3	+5.1
Colo.	260	23,092	88.82	+1.2	+3.6	-1.5	-16.7
Conn.	312	32,123	102.96	-1.6	-10.7	-.6	-16.1
Del.	304	24,780	81.51	+3.1	+4.0	+7.0	+14.9
D. C.	194	14,394	74.20	-1.5	-.5	+2.6	+3.6
Fla. 3/	2,581	177,024	68.59	+.3	+1.5	+.4	+5.0
Ga.	3,172	184,827	58.27	+.3	+1.0	+2.4	+4.5
Guam 4/	6	132	(5/)	---	---	---	---
Hawaii 3/	81	9,268	114.42	(5/)	(5/)	(5/)	(5/)
Idaho	133	9,959	74.88	+.8	+1.9	+.8	+3.9
Ill. 3/	2,569	231,283	90.03	-.8	-.6	-8.0	-12.0
Ind.	1,785	159,954	89.61	0	+6.6	-.9	+7.0
Iowa	1,215	120,946	99.54	-.1	-2.3	-6.0	-7.8
Kans.	503	41,967	83.43	-.8	-2.9	-7.4	-10.6
Ky. 3/	2,440	175,845	72.07	+.3	+2.1	+2.7	+2.7
La.	2,828	229,430	81.13	+.5	+.4	+1.1	+1.5
Maine 3/	345	29,529	85.59	-1.7	-1.1	-15.2	-11.3
Md. 3/	403	32,349	80.27	-.2	+.1	-3.4	+10.8
Mass.	2,286	301,857	132.05	+.6	-2.7	+.5	-.4
Mich.	1,684	150,953	89.64	+.1	+3.3	+.5	-4.6
Minn.	1,088	132,627	121.90	+.9	+10.1	+4.8	+5.3
Miss.	2,942	130,887	44.49	-2.0	-2.1	-7.7	+9.1
Mo. 2/	4,564	342,300	75.00	-.1	-.1	-2.4	+4.6
Mont.	249	20,871	83.82	-5.7	-6.6	-9.5	-2.5
Nebr.	660	66,584	100.88	-1.5	-3.0	-2.2	+2.4
Nev.	166	20,334	121.33	0	+4.5	+4.3	+6.2
N. H.	267	27,965	104.74	+4.3	+5.1	+2.7	+3.8
N. J.	956	81,225	84.96	+1.0	-1.5	-.4	-1.7
N. Mex. 3/	344	30,830	89.62	+1.5	+.2	-.6	+17.1
N. Y.	3,184	353,954	111.17	-.4	-2.4	-1.2	-2.1
N. C.	5,087	334,284	65.71	+.5	+.9	+.3	+6.9
N. Dak.	79	6,067	76.80	(5/)	(5/)	(5/)	(5/)
Ohio	3,362	291,880	86.82	-.7	+1.8	-2.1	+3.9
Okla. 3/	1,688	205,024	121.46	+.1	-.2	-.8	+5.1
Oreg.	421	34,583	82.14	+2.9	+.8	+7.1	-7.7
Pa. 2/	17,899	1,332,686	74.46	+.2	-.3	+.5	+.2
P. R.	1,508	12,642	8.38	-.1	+.1	-6.6	-5.5
R. I. 3/	101	8,601	85.16	-1.0	-4.0	-1.0	-4.1
S. C.	1,774	110,002	62.01	+.5	-.9	+5.4	+8.1
S. Dak.	122	8,434	69.13	-3.9	-4.1	-11.6	-6.9
Tenn.	2,221	116,742	52.56	-1.5	-.3	-6.6	+2.8
Tex.	4,820	334,400	69.33	+.2	+.1	-5.2	-4.0
Utah	178	13,085	73.51	+3.5	-5.5	-1.1	-7.9
Vt. 3/	115	7,815	67.96	+.9	-.3	+3.6	+6.9
V. I.	15	513	(5/)	(5/)	(5/)	(5/)	(5/)
Va.	1,146	77,690	67.79	-.5	-1.3	+.8	+2.9
Wash.	666	59,949	90.01	-.1	-5.2	+1.4	+11.8
W. Va.	823	39,597	48.11	-.8	-.6	-5.8	-4.1
Wis.	807	80,532	99.79	-.7	+2.7	-4.9	-3.1
Wyo.	58	4,581	78.98	(5/)	(5/)	(5/)	(5/)

1/ All data subject to revision. 2/ Data include recipients of payments made without Federal participation and payments to these recipients as follows: California, $5,414 to 52 recipients; Missouri, $51,092 to 676 recipients; and Pennsylvania, $941,913 to 12,750 recipients. 3/ Represents aid to the blind under program for aid to the aged, blind, or disabled or for such aid and medical assistance for the aged. 4/ Data for March; April and May data not available. 5/ Average payment not computed on base of fewer than 50 recipients; percentage change on fewer than 100 recipients.

than 100 recipients.

Table 6. Aid to the permanently and totally disabled: Recipients and payments to recipients, by State, May 1964 1/

/Includes vendor payments for medical care and cases receiving only such payments/

State	Number of recipients	Payments to recipients		Percentage change from--			
		Total amount	Average	April 1964 in--		May 1963 in--	
				Number	Amount	Number	Amount
Total.....	497,451	$38,975,943	$78.35	+0.7	+0.8	+8.3	+12.9
Ala.....	14,430	669,420	46.39	+.6	+1.6	+7.1	+8.8
Alaska 2/.....	153	19,302	126.16	+8.5	+42.7	(3/)	(3/)
Ariz.....	2,838	191,585	67.51	+2.2	+2.3	+65.3	+63.6
Ark.....	9,216	550,427	59.73	+.5	+5.2	+5.4	+7.4
Calif.....	47,816	5,420,886	113.37	+2.3	+2.0	+47.7	+51.5
Colo.....	6,033	456,981	75.75	(4/)	+1.8	+3.0	+6.1
Conn.....	7,173	483,842	67.45	+.1	-16.2	+11.0	+9.5
Del.....	440	31,666	71.97	+3.5	+1.7	+2.3	+2.4
D. C.....	3,034	246,548	79.94	+2.0	+6.1	+2.5	+4.3
Fla. 2/.....	15,968	1,158,013	72.52	+.5	+3.0	+9.7	+16.5
Ga.....	25,987	1,547,442	59.55	+.7	+1.8	+2.1	+5.3
Guam 5/.....	59	1,528	25.90	---	---	---	---
Hawaii 2/.....	1,061	143,818	135.55	+.6	+21.2	+4.3	+11.6
Idaho.....	2,772	158,333	57.12	+2.2	+2.7	+14.6	+18.1
Ill. 2/.....	28,075	2,614,909	93.14	+.4	+.6	-.3	-5.2
Ind.....	1,056	126,968	120.23	+5.2	+9.7	+514.0	+709.4
Iowa.....	1,123	92,908	82.73	+1.6	+1.9	+20.6	+23.1
Kans.....	4,518	446,771	98.89	+.5	-3.7	+4.9	+8.5
Ky. 2/.....	9,884	755,860	76.47	+.9	-.2	+6.1	+7.3
La.....	18,826	1,092,839	58.05	+.2	+.7	+3.8	+5.1
Maine 2/.....	2,229	196,476	88.15	+.2	(6/)	-6.3	-3.2
Md. 2/.....	7,375	573,428	77.75	+1.2	+1.0	+12.3	+24.8
Mass.....	11,766	1,689,907	143.63	+1.6	+.1	+8.7	+14.7
Mich.....	7,507	799,847	106.55	+.9	+1.3	+12.6	+11.3
Minn.....	3,428	209,903	61.23	+1.0	+1.5	+10.7	+11.2
Miss.....	17,280	752,243	43.53	+1.4	+1.3	+14.3	+45.4
Mo.....	14,606	1,017,859	69.69	+.3	+.4	-1.6	+.7
Mont.....	1,268	99,825	78.73	0	+.1	+1.4	+4.5
Nebr.....	2,462	239,097	97.11	+.2	+3.8	+13.5	+35.7
N. H.....	575	65,462	113.85	+.9	+1.2	+.2	+13.2
N. J.....	8,305	785,301	94.56	+.4	+.7	+4.5	+5.2
N. Mex. 2/.....	3,588	306,939	85.55	+1.1	+1.1	+13.1	+20.3
N. Y.....	35,234	4,508,027	127.95	+.3	+.6	+.8	+3.1
N. C.....	21,778	1,523,522	69.96	+1.0	+2.1	-.1	+5.2
N. Dak.....	1,460	177,341	121.47	+2.5	+8.1	+13.7	+26.3
Ohio.....	18,706	1,481,642	79.21	+.3	+4.2	+6.8	+7.4
Okla. 2/.....	12,999	1,444,437	111.12	+.9	+1.6	+10.5	+17.1
Oreg.....	7,801	498,566	63.91	+.7	+1.9	+57.1	+8.5
Pa.....	19,622	1,301,412	66.32	(6/)	+.3	+.6	+6.2
P. R.....	21,298	183,882	8.63	-.3	-.3	-2.6	-2.5
R. I. 2/.....	2,756	249,754	90.62	+.6	+.4	+6.9	+10.3
S. C.....	8,547	465,024	54.41	+.5	-4.6	+3.4	+9.5
S. Dak.....	1,101	76,753	69.71	0	+.4	0	+4.5
Tenn.....	12,548	631,838	50.35	+.2	+.7	+3.6	+9.0
Tex.....	9,214	527,706	57.27	+.9	+.9	+10.5	+10.0
Utah.....	4,739	325,357	68.66	+2.0	-.9	+1.6	-1.1
Vt. 2/.....	1,074	90,106	83.90	+1.6	+4.7	+14.0	+42.6
V. I.....	91	3,108	34.15	(7/)	(7/)	(7/)	(7/)
Va.....	6,724	455,292	67.71	+.8	+3.3	+3.9	+7.3
Wash.....	18,221	1,072,420	58.86	-.9	-9.1	+6.6	+15.6
W. Va.....	6,164	316,473	51.34	-.8	-1.2	-9.7	-1.4
Wis.....	5,859	647,997	110.60	+1.1	-1.0	+10.6	+12.3
Wyo.....	614	48,893	79.63	0	-7.8	+3.0	-4.2

1/ All data subject to revision. 2/ Represents aid to the permanently and totally disabled under program for aid to the aged, blind, or disabled or for such aid and medical assistance for the aged. 3/ Program not in operation in May 1963. 4/ Decrease of less than 0.05 percent. 5/ Data for March; data for April and May not available. 6/ Increase of less than 0.05 percent. 7/ Percentage change not computed on fewer than 100 recipients.

Table 7. Aid to families with dependent children: Recipients and payments to recipients, by State, May 1964 1/

[Includes vendor payments for medical care and cases receiving only such payments]

State	Number of families	Number of recipients		Payments to recipients			Percentage change from--			
					Average per--		April 1964 in--		May 1963 in--	
		Total 2/	Children	Total amount	Family	Recipient	Number of recipients	Amount	Number of recipients	Amount
Total 3/ 4/.	1,021,647	4,253,591	3,183,965	$138,444,208	$135.51	$32.55	-0.2	-0.8	+7.0	+11.5
Ala. 4/.....	22,551	92,614	73,095	1,084,925	48.11	11.71	+.1	+.1	+1.3	+1.9
Alaska 4/.....	1,309	4,701	3,569	163,429	124.85	34.76	(5/)	+.5	+7.9	+9.4
Ariz. 4/.....	9,837	42,338	31,819	1,228,309	124.87	29.01	+.7	+2.3	+3.5	+3.7
Ark.....	7,145	29,351	22,162	500,235	70.01	17.04	+1.5	+2.2	+5.5	+1.6
Calif. 3/ 4/..	120,592	494,068	367,554	21,778,371	180.60	44.08	+1.6	+.1	+38.2	+37.4
Colo.....	10,391	40,688	31,517	1,503,592	144.70	36.95	+.6	+.5	+5.7	+5.4
Conn. 3/.....	14,392	57,599	41,535	2,537,032	176.28	44.05	-1.2	-13.1	+14.1	+10.9
Del. 3/.....	2,525	11,699	8,833	317,168	125.61	27.11	-5.7	+16.7	+20.3	+47.2
D. C.....	4,010	19,062	15,291	622,876	155.33	32.68	+.5	+.1	-2.1	-2.0
Fla.....	27,233	103,011	82,897	1,656,756	60.84	16.08	-.1	(6/)	-2.0	-4.4
Ga.....	16,232	65,451	50,007	1,460,373	89.97	22.31	+4.3	+2.1	+2.3	-1.4
Guam 7/.....	134	671	557	8,715	65.04	12.99	---	---	---	---
Hawaii 3/.....	3,216	13,748	10,269	508,377	158.08	36.98	-2.2	+6.9	-1.9	+7.7
Idaho.....	2,592	10,138	7,424	384,311	148.27	37.91	-2.1	-5.4	+4.0	-4.0
Ill. 3/ 4/....	56,464	266,210	203,421	11,699,631	207.21	43.95	-1.1	-1.6	-1.6	-1.2
Ind. 4/.....	12,067	48,514	36,163	1,413,407	117.13	29.13	+.8	+.4	+.2	+4.0
Iowa.....	10,313	41,227	30,007	1,608,754	155.99	39.02	+.9	+2.5	-3.7	+.6
Kans. 3/ 4/...	7,991	33,345	25,573	1,213,545	151.86	36.39	-1.4	-2.1	+17.8	+16.0
Ky. 4/.....	20,365	78,125	56,099	1,996,824	98.05	25.56	+1.1	+3.1	-3.7	-5.6
La. 4/.....	23,316	101,639	76,957	2,362,143	101.31	23.24	-.8	-.2	+3.1	+4.0
Maine.....	5,477	19,902	14,751	578,332	105.59	29.06	-.5	-.6	-10.8	-12.7
Md. 3/ 4/.....	16,348	70,663	54,477	2,296,300	140.46	32.50	-.5	-.7	+17.4	+20.7
Mass. 3/.....	23,975	89,557	66,868	4,265,628	177.92	47.63	+1.4	-2.0	+14.7	+20.0
Mich. 3/ 4/...	39,027	157,044	114,585	5,564,676	142.59	35.43	+2.9	+7.0	+22.6	+18.2
Minn. 4/.....	12,988	47,542	37,104	2,456,878	189.17	51.68	+1.0	+3.6	+11.9	+17.3
Miss.....	20,899	82,851	65,990	879,060	42.06	10.61	+.4	+.4	+2.1	+21.1
Mo. 4/.....	26,332	106,987	81,136	2,569,929	97.60	24.02	+.2	(5/)	+3.5	+1.8
Mont.....	1,815	7,196	5,538	253,425	139.63	35.22	-.9	-.5	+3.3	+6.5
Nebr.....	3,659	14,936	11,494	457,111	124.93	30.60	+.4	+.5	+9.9	+13.6
Nev.....	1,192	4,732	3,737	151,158	126.81	31.94	-.9	+.2	-3.1	+3.8
N. H.....	1,058	4,376	3,268	187,519	177.24	42.85	+.5	-.6	+2.9	+7.5
N. J.....	25,162	99,227	75,036	4,803,222	190.89	48.41	+1.0	+1.1	+11.0	+14.1
N. Mex. 4/....	7,658	31,260	23,687	1,024,971	133.84	32.79	-.4	-.6	+3.9	+4.3
N. Y. 3/.....	113,294	492,609	360,638	21,769,552	192.15	44.19	-1.2	-3.5	+12.5	+16.3
N. C. 3/.....	28,130	117,265	87,529	2,825,997	100.46	24.10	-.5	-.1	-2.4	+1.7
N. Dak.....	1,856	7,364	5,649	321,066	172.99	43.60	+2.7	+3.3	+7.5	+13.8
Ohio 3/.....	41,098	169,986	127,065	5,453,236	132.69	32.08	+1.5	+4.0	+10.4	+20.6
Okla. 3/ 4/...	18,825	73,965	54,784	2,562,412	136.12	34.64	+.4	+.5	+3.9	+11.5
Oreg. 3/ 4/...	7,934	31,217	23,110	1,174,050	147.98	37.61	-3.0	-2.7	-4.9	-6.1
Pa. 3/.....	72,085	321,650	228,350	9,196,199	127.57	28.59	-2.6	-2.0	-7.3	-4.1
P. R.....	51,269	205,929	164,510	831,311	16.21	4.04	-1.2	+10.0	-6.7	+2.8
R. I. 3/.....	5,812	23,640	17,268	950,590	163.56	40.21	-2.1	-1.7	+10.1	+12.4
S. C.....	7,845	31,442	25,161	512,046	65.27	16.29	-1.1	-3.5	-7.3	-5.1
S. Dak.....	2,760	10,131	7,739	308,154	111.65	30.42	-.9	-1.0	+.2	-10.7
Tenn. 4/.....	19,367	76,692	57,806	1,540,524	79.54	20.09	-.7	+.1	-4.4	+2.8
Tex.....	19,305	88,191	66,599	1,573,930	81.53	17.85	+.4	+.4	+13.3	+6.8
Utah 3/ 4/....	4,935	20,752	14,932	671,067	135.98	32.34	-2.3	-6.5	+9.5	+2.8
Vt.....	1,414	5,401	3,966	161,412	114.15	29.89	+.8	+.7	+9.0	+7.5
V. I.....	314	1,163	979	19,890	63.34	17.10	+7.5	-.8	+13.1	+18.7
Va. 4/.....	10,742	45,556	35,006	1,101,803	102.57	24.19	-.3	+.7	+1.3	+3.5
Wash. 3/ 4/...	17,504	70,167	50,239	2,456,148	140.32	35.00	-3.9	-9.9	+61.8	+34.0
W. Va. 3/ 4/..	26,483	121,499	83,574	3,252,288	122.81	26.77	-2.1	-2.2	-8.6	-4.9
Wis. 4/.....	11,519	45,066	33,983	2,094,836	181.86	46.48	+.4	-1.9	+3.0	+3.5
Wyo.....	891	3,434	2,658	130,715	146.71	38.06	+.9	-2.0	+4.6	+7.7

1/ All data subject to revision. 2/ Includes as recipients the children and 1 or both parents or 1 caretaker relative other than a parent in families in which the requirements of such adults were considered in determining the amount of assistance. 3/ Includes data on unemployed-parent segment; see table 8. 4/ Includes data on foster-family care; see table 9. 5/ Increase of less than 0.05 percent. 6/ Decrease of less than 0.05 percent. 7/ Data for March; data for April and May not available.

Table 8. Aid to families with dependent children, unemployed-parent segment: Recipients and payments to recipients, May 1964 1/

/Includes vendor payments for medical care and cases receiving only such payments/

State	Number of families	Number of recipients		Payments to recipients			Percentage change from--			
		Total 2/	Children	Total	Average per--		April 1964 in--		May 1963 in--	
					Family	Recipient	Number of recipients	Amount	Number of recipients	Amount
Total...	74,280	427,530	285,831	$13,248,593	$178.36	$30.99	-4.9	-5.8	+31.0	+38.5
Calif.....	12,247	71,427	48,504	2,673,407	218.29	37.43	-1.7	-6.1	(3/)	(3/)
Conn.....	2,404	13,267	8,705	367,125	152.71	27.67	-8.7	-35.7	+.1	-13.6
Del.....	445	2,695	1,894	71,149	159.89	26.40	-19.2	-1.4	+35.7	+64.0
Hawaii....	322	2,018	1,413	61,213	190.10	30.33	-10.0	-2.8	-16.7	-8.2
Ill.....	7,899	50,313	34,862	2,064,296	261.34	41.03	-6.9	-5.2	-15.5	-14.1
Kans.....	374	2,141	1,432	67,717	181.06	31.63	-16.1	-12.6	(3/)	(3/)
Md.....	509	3,109	2,111	88,702	174.27	28.53	-15.5	-15.6	-1.1	+1.5
Mass.....	703	3,855	2,554	134,748	191.68	34.95	-10.2	-7.4	+51.5	+33.2
Mich.....	3,887	24,353	16,640	694,307	178.62	28.51	+16.6	+96.0	(3/)	(3/)
N. Y.....	16,062	92,748	62,469	2,909,736	181.16	31.37	-7.2	-9.2	+7.7	+12.7
Ohio.....	2,267	12,582	8,469	360,415	158.98	28.65	+23.2	+28.4	(3/)	(3/)
Okla.....	25	160	114	4,181	(4/)	(4/)	-1.2	-5.4	-25.6	-28.9
Oreg.....	953	5,308	3,720	187,657	196.91	35.35	-17.2	-19.3	-2.2	-4.5
Pa.....	10,259	56,504	36,607	1,287,136	125.46	22.78	-8.1	-10.3	-27.6	-25.0
R.I.....	679	3,777	2,482	129,229	190.32	34.21	-10.0	-7.8	+20.1	+19.6
Utah.....	1,000	5,479	3,718	102,019	102.02	18.62	-12.1	-9.8	+18.7	-.8
Wash.....	3,022	16,948	10,961	388,974	128.71	22.95	-13.8	-27.6	(3/)	(3/)
W. Va.....	11,223	60,846	39,176	1,656,582	147.61	27.23	-3.3	-3.1	-7.4	-4.0

1/ Data for this segment of the program, shown separately here, are included in data for the total program. All data subject to revision. 2/ Includes as recipients the children and 1 or both parents or 1 caretaker relative other than a parent in families in which the requirements of such adults were considered in determining the amount of assistance. 3/ No program in operation May 1963. 4/ Average payment not computed on base of fewer than 50 families.

Table 9. Aid to families with dependent children receiving foster care: Recipients and payments for foster care, by State, May 1964 1/

State	Number of--				Payments for foster care			
	Children receiving foster care			Families from which children were removed	Total amount	Average per child	In foster homes	In institutions
	Total	In foster homes	In institutions					
Total.....	4,204	2/ 3,856	2/ 156	1,718	$288,719	$68.68	2/ $252,054	2/$23,263
Ala.....	12	12	0	6	448	(3/)	448	0
Alaska.....	43	43	0	17	4,502	(3/)	4,502	0
Ariz.....	172	172	0	60	10,256	59.63	10,256	0
Calif.....	997	907	90	461	89,822	90.09	73,657	16,165
Ill.....	192	(2/)	(2/)	74	13,402	69.80	(2/)	(2/)
Ind.....	99	99	0	33	3,843	38.82	3,843	0
Kans.....	51	43	8	29	4,726	92.67	3,973	753
Ky.....	7	7	0	3	490	(3/)	490	0
La.....	387	374	13	164	25,969	67.10	24,627	1,342
Md.....	354	333	21	115	25,546	72.16	23,797	1,749
Mich.....	29	28	1	13	1,648	(3/)	1,528	120
Minn.....	170	161	9	78	15,131	89.01	12,682	2,449
Mo.....	63	63	0	15	1,998	31.71	1,998	0
N. Mex.....	67	67	0	25	3,695	55.15	3,695	0
N. C.....	39	39	0	9	1,704	(3/)	1,704	0
Okla.....	300	300	0	119	13,135	43.78	13,135	0
Oreg.....	124	124	0	50	8,231	66.38	8,231	0
Tenn.....	181	175	6	59	12,159	67.18	11,799	360
Utah.....	188	188	0	87	9,755	51.89	9,755	0
Va.....	34	34	0	11	1,490	(3/)	1,490	0
Wash.....	479	479	0	204	27,540	57.49	27,540	0
W. Va.....	54	46	8	21	2,820	52.22	2,495	325
Wis.....	162	162	0	65	10,409	64.25	10,409	0

1/ Data for this segment of the program, shown separately here, are included in data for the total program. All data subject to revision. 2/ Excludes Illinois; breakdown not available. 3/ Average payment not computed on base of fewer than 50 children.

Table 10. General assistance: Recipients and payments to recipients, by State, May 1964 1/

/Excludes vendor payments for medical care and cases receiving only such payments/

State	Number of--		Payments to recipients			Percentage change from--			
				Average per--		April 1964 in--		May 1963 in--	
	Cases	Recipients	Total amount	Case	Recipient	Number of recipients	Amount	Number of recipients	Amount
Total 2/	337,000	750,000	$21,846,000	$64.85	$29.11	-11.1	-9.2	-12.1	-5.7
Ala.	83	91	1,116	13.45	12.26	(3/)	(3/)	-15.7	-16.9
Alaska	199	607	13,398	67.33	22.07	-13.7	-8.2	-12.3	+10.6
Ariz.	2,054	4,808	112,221	54.64	23.34	-19.9	-6.7	-14.6	-23.9
Ark.	292	1,135	4,143	14.19	3.65	-21.9	-29.5	+4.8	-12.1
Calif.	26,771	49,034	1,467,453	54.82	29.93	-18.8	-7.1	-35.2	-28.0
Colo.	1,538	5,097	62,227	40.46	12.21	-36.6	-40.5	-1.4	-2.5
Conn.	4/ 4,161	4/ 9,583	4/ 271,879	65.34	28.37	-4.1	-4.4	-14.2	-9.1
Del.	1,652	2,927	88,622	53.65	30.28	-4.2	-5.7	+24.0	+19.8
Dist. of Col.	685	753	51,247	74.81	68.06	+10.1	+10.1	-7.7	-4.8
Fla. 5/	7,900	(6/)	246,000	---	---	---	---	---	---
Ga.	2,308	5,240	73,197	31.71	13.97	-9.2	-5.7	-.7	+2.0
Guam 7/	12	24	429	(3/)	(3/)	---	---	---	---
Hawaii	1,093	1,394	74,363	68.04	53.35	-2.2	-1.0	-5.9	+9.9
Ill.	28,335	59,399	2,244,711	79.22	37.79	-8.2	-8.0	+4.8	+2.9
Iowa 5/	3,900	9,100	145,000	---	---	---	---	---	---
Kans.	2,979	7,362	194,858	65.41	26.47	-7.5	-5.7	-14.7	-9.9
Ky.	1,448	4,331	54,199	37.43	12.51	-14.1	-6.7	-33.0	-35.4
La.	8,238	9,102	429,432	52.13	47.18	(8/)	+.4	+6.1	+6.3
Maine	2,652	8,780	119,141	44.92	13.57	-23.5	-25.1	-21.6	-11.0
Md.	6,191	6,957	446,195	72.07	64.14	-1.4	-.7	+19.5	+21.8
Mass.	7,803	16,107	568,915	72.91	35.32	-7.8	-11.4	+8.7	+9.2
Mich.	24,153	72,696	2,113,417	87.50	29.07	-21.3	-21.3	-39.6	-35.9
Minn.	10,588	30,990	845,479	79.85	27.28	-14.5	-17.6	+7.7	+9.8
Miss.	1,187	1,632	18,335	15.45	11.23	+3.4	+3.8	+12.6	+18.7
Mo.	9,795	12,722	649,043	66.26	51.02	-2.5	(9/)	+.8	+2.6
Mont.	2,032	6,782	85,882	42.26	12.66	-14.8	-16.1	+26.3	+30.0
Nev.	332	665	20,632	62.14	31.03	-2.5	+.7	+39.7	+10.6
N. H.	1,005	3,407	59,377	59.08	17.43	-18.7	-23.9	-4.8	-6.2
N. J. 10/	10,030	33,076	1,200,941	119.73	36.31	-11.7	-11.2	+4.5	+2.4
N. Mex.	769	1,169	27,115	35.26	23.20	0	-6.6	+19.9	+33.0
N. Y. 11/	43,217	94,256	3,481,009	80.55	36.93	-1.0	-2.3	+19.1	+27.4
N. C.	1,491	4,233	30,492	20.45	7.20	-23.0	-26.7	-13.6	-28.6
N. Dak.	384	1,577	22,541	58.70	14.29	-36.4	-37.4	+1.4	+2.0
Ohio	29,315	99,143	2,098,192	71.57	21.16	-11.2	-10.7	-19.8	-15.9
Okla.	8,471	(6/)	105,233	12.42	---	---	+1.9	---	+8.2
Oreg.	4,588	(6/)	249,089	54.29	---	---	-11.4	---	-23.5
Pa.	38,361	46,476	2,266,443	59.08	48.77	-1.7	-1.9	-4.3	-3.3
P. R.	1,796	1,796	16,109	8.97	8.97	+15.4	+28.8	+22.3	+49.2
R. I.	2,821	6,171	155,088	54.98	25.13	-8.3	-24.0	+9.3	-7.4
S. C.	1,392	1,620	44,007	31.61	27.16	-6.7	-4.8	-14.4	-3.6
S. Dak.	483	1,758	17,299	35.82	9.84	-12.9	-20.1	+35.0	+21.2
Tenn.	1,754	4,709	37,513	21.39	7.97	-6.6	-13.6	-26.7	+1.4
Tex. 12/ 13/	10,000	(6/)	262,000	---	---	---	---	---	---
Utah	1,716	5,000	117,277	68.34	23.46	-14.4	-26.6	+24.1	+8.3
Vt. 12/ 13/	1,100	(6/)	35,000	---	---	---	---	---	---
V. I.	166	171	5,121	30.85	29.95	-5.0	-2.4	-.6	-2.5
Va.	2,706	7,071	132,737	49.05	18.77	-12.3	-5.1	+14.2	+17.0
Wash.	8,043	13,369	543,419	67.56	40.65	-6.8	-6.0	-36.7	-23.0
W. Va.	1,424	2,369	53,635	37.67	22.64	-6.6	+.9	+.2	+30.1
Wis.	8,074	25,118	751,123	93.03	29.90	-13.9	-17.2	-3.2	+.5
Wyo.	386	1,449	28,803	74.62	19.88	-41.5	-43.0	+4.5	+7.3

1/ All data subject to revision. 2/ Partly estimated; does not represent sum of State figures because totals exclude for New Jersey an estimated number of cases and persons receiving only medical care, hospitalization, and/or burial and payments for such services; recipient count also includes an estimate for States not reporting such data. Excludes Idaho, Indiana, and Nebraska; data not available. 3/ Average payment not computed on base of fewer than 50 recipients; percentage change on fewer than 100 recipients. 4/ About 7 percent of this total is estimated. 5/ Partly estimated. 6/ Data not available. 7/ Data for March; data for April and May not available. 8/ Increase of less than 0.05 percent. 9/ Decrease of less than 0.05 percent. 10/ Includes an unknown number of cases and persons receiving only medical care, hospitalization, and/or burial, and total payments for such services. 11/ Includes an unknown number of cases and persons receiving only medical care. 12/ Estimated on basis of reports from sample of local jurisdictions. 13/ Data for April; data for May not available.

Table 11. Amount of vendor payments for medical care for recipients of public assistance, by program and State, May 1964 1/

State	Old-age assistance	Medical assistance for the aged	Aid to the blind	Aid to the permanently and totally disabled	Aid to families with dependent children	General assistance
Total.....	$37,048,267	$35,219,429	$999,066	$9,724,371	$11,999,548	2/ $8,880,000
Ala.....	1,054,250	69,324	4,364	67,134	702	36
Alaska 3/.....	32,298	---	---	9,505	328	75,413
Ariz.....	46,976	---	---	---	---	---
Ark.....	645,448	137,094	17,394	186,158	45,742	34,160
Calif.....	3,986,180	7,990,328	210,362	1,029,676	1,356,273	128,925
Colo.....	962,052	---	5,103	100,571	110,125	95,893
Conn.....	98,210	4/ 1,093,257	11,874	199,136	310,653	(5/)
Del.....	22,805	---	1,729	---	---	---
D. C.....	57,305	302,196	313	24,826	1,806	174
Fla. 3/.....	1,284,402	238,298	23,813	263,731	64,749	---
Ga.....	819,187	---	8,016	137,051	---	---
Guam 6/.....	615	2,276	---	---	---	---
Hawaii 3/.....	30,165	157,654	3,347	73,126	91,401	30,856
Idaho.....	51,726	245,126	235	21,296	---	---
Ill. 3/.....	2,610,285	169,988	77,670	799,929	1,520,270	7/ 824,983
Ind.....	817,383	---	50,083	76,931	234,648	---
Iowa.....	1,037,942	379,640	11,738	---	177,332	7/ 8/ 280,000
Kans.....	179,701	4/ 332,673	3,156	40,631	85,937	41,164
Ky. 3/.....	681,059	267,232	20,430	137,952	252,678	---
La.....	2,188,705	94,646	6,320	93,674	27,038	4,426
Maine 3/.....	345,371	97,981	3,967	41,236	27,385	76,735
Md. 3/.....	96,747	320,910	3,942	76,198	---	1,689
Mass.....	1,085,502	4/ 4,274,823	20,125	892,227	476,546	207,409
Mich.....	747,359	1,937,462	24,914	192,310	203,714	480,897
Minn.....	3,105,906	---	62,651	45,545	411,670	717,602
Miss.....	127,102	---	3,089	---	---	---
Mo.....	865,265	---	---	34,426	30,959	13,982
Mont.....	2,374	---	394	20	902	7/ 382,715
Nebr.....	613,768	---	30,243	120,204	38,288	---
Nev.....	58,280	---	4,068	(9/)	9,526	7/ 10/240,056
N. H.....	96,060	72,497	5,313	20,239	31,086	(5/)
N. J.....	265,718	4/ 1,053,786	11,170	230,049	287,110	295,570
N. Mex. 3/.....	172,020	---	5,625	59,295	93,810	7,631
N. Y.....	1,265,438	4/10,757,600	93,721	2,050,923	3,003,299	265,664
N. C.....	367,869	---	24,185	266,994	231,271	7/ 125,814
N. Dak.....	167,437	4/ 256,404	857	87,072	65,235	7/ 22,026
Ohio.....	1,702,674	---	57,237	337,073	559,157	7/ 1,050,034
Okla. 3/.....	1,493,370	179,439	30,438	231,444	182,615	(5/)
Oreg.....	133,136	463,413	3,367	151,307	81,853	58,861
Pa.....	517,251	1,889,240	64,412	262,010	490,059	150,793
P. R.....	22,248	102,466	---	---	---	---
R. I. 3/.....	92,426	---	1,515	48,506	139,476	7/ 78,191
S. C.....	309,490	201,468	13,750	77,885	34,477	16,840
S. Dak.....	109,005	---	---	---	---	7/ 109,749
Tenn.....	494,761	218,255	5,108	23,841	48,547	---
Tex.....	2,763,175	---	---	---	---	---
Utah.....	57,539	234,160	2,374	131,330	87,264	2,010
Vt. 3/.....	201,244	30,245	1,238	24,869	---	---
V. I.....	1,401	1,394	4	91	158	155
Va.....	234,487	120,138	11,472	87,412	56,400	7/ 19,782
Wash.....	566,546	1,333,006	13,112	476,717	366,047	118,410
W. Va.....	159,359	186,719	4,908	67,091	440,246	12,903
Wis.....	2,159,586	---	39,519	419,761	315,085	233,253
Wyo.....	41,659	8,291	401	6,969	7,681	42,241

1/ For State programs not shown, no vendor payments were made during the month or such payments were not reported. 2/ Includes an estimated amount for States making vendor payments for medical care from general assistance funds and from special medical funds and reporting these data semiannually but not on a monthly basis. 3/ Except for aid to families with dependent children and general assistance, data represent payments for recipients of the specified type of assistance under program for aid to the aged, blind, or disabled or for such aid and medical assistance for the aged. 4/ Includes money payments not subject to Federal participation as follows: $920 in Connecituct, $11,084 in Kansas, $97,253 in Massachusetts, $9,674 in New Jersey, $53,551 in New York, and $2,275 in North Dakota. 5/ Data not available. 6/ Data for March; April and May data not available. 7/ Includes payments made in behalf of recipients of the special types of public assistance. 8/ Partly estimated. 9/ No program for aid to the permanently and totally disabled. 10/ Data for April; data for May not available.

Table 12. Average payment per recipient for all assistance, for money payments, and for vendor payments for medical care, by program and State, May 1964 1/

State	Old-age assistance			Medical assistance for the aged	Aid to the blind			Aid to the permanently and totally disabled			Aid to families with dependent children (per recipient)		
	All assistance	Money payments to recipients	Vendor payments for medical care		All assistance	Money payments to recipients	Vendor payments for medical care	All assistance	Money payments to recipients	Vendor payments for medical care	All assistance	Money payments to recipients	Vendor payments for medical care
Total.....	$78.34	$61.39	$16.95	$194.52	$84.04	$73.80	$10.24	$78.35	$58.80	$19.55	$32.55	$29.73	$2.82
Ala.....	68.00	58.42	9.58	268.70	61.76	59.26	2.49	46.39	41.74	4.65	11.71	11.71	.01
Alaska 2/.....	92.72	69.40	23.32	---	77.02	77.02	---	126.16	64.03	62.12	34.76	34.69	.07
Ariz.....	62.25	58.72	3.54	---	72.46	72.46	---	67.51	67.51	---	29.01	29.01	---
Ark.....	63.63	52.51	11.12	55.87	69.67	60.83	8.84	59.73	39.53	20.20	17.04	15.48	1.56
Calif.....	108.52	93.96	14.57	287.31	131.91	115.10	16.81	113.37	91.84	21.53	44.08	41.33	2.75
Colo.....	101.68	82.01	19.67	---	88.82	69.19	19.63	75.75	59.08	16.67	36.95	34.25	2.71
Conn.....	73.87	61.15	12.72	183.68	102.96	64.90	38.06	67.45	39.69	27.76	44.05	38.65	5.39
Del.....	70.15	51.97	18.17	---	81.51	75.83	5.69	71.97	71.97	---	27.11	27.11	---
D. C.....	86.72	62.71	24.01	411.15	74.20	72.58	1.61	79.94	71.89	8.05	32.68	32.58	.09
Fla. 2/.....	67.22	49.32	17.90	383.73	68.59	59.36	9.23	72.52	56.00	16.52	16.08	15.45	.63
Ga.....	56.61	47.70	8.91	---	58.27	55.74	2.53	59.55	54.27	5.27	22.31	22.31	---
Guam 3/.....	30.25	26.54	3.70	17.51	(4/)	(4/)	---	25.90	25.90	---	12.99	12.99	---
Hawaii 2/.....	81.44	55.39	26.05	311.57	114.42	73.10	41.32	135.55	66.63	68.92	36.98	30.33	6.65
Idaho.....	72.53	61.54	10.99	127.27	74.88	73.11	1.77	57.12	49.44	7.68	37.91	37.91	---
Ill. 2/.....	88.27	43.78	44.49	309.63	90.03	59.79	30.23	93.14	64.65	28.49	43.95	38.24	5.71
Ind.....	79.75	44.53	35.22	---	89.61	61.55	28.06	120.23	47.38	72.85	29.13	24.30	4.84
Iowa.....	92.33	56.29	36.04	126.42	99.54	89.88	9.66	82.73	82.73	---	39.02	34.72	4.30
Kans.....	78.19	70.03	8.16	155.09	83.43	77.16	6.27	98.89	89.89	8.99	36.39	33.82	2.58
Ky. 2/.....	62.79	50.79	12.00	32.12	72.07	63.69	8.37	76.47	62.52	13.96	25.56	22.33	3.23
La.....	85.02	68.20	16.82	177.24	81.13	78.89	2.23	58.05	53.07	4.98	23.24	22.97	.27
Maine 2/.....	84.07	53.08	30.99	241.93	85.59	74.09	11.50	88.15	69.65	18.50	29.06	27.68	1.38
Md. 2/.....	72.76	62.58	10.17	31.05	80.27	70.49	9.78	77.75	67.42	10.33	32.50	32.50	---
Mass.....	90.25	70.39	19.86	160.94	132.05	123.24	8.80	143.63	67.80	75.83	47.63	42.31	5.32
Mich.....	85.07	70.09	14.98	351.56	89.64	74.85	14.79	106.55	80.93	25.62	35.43	34.14	1.30
Minn.....	114.30	42.21	72.09	---	121.90	64.32	57.58	61.23	47.95	13.29	51.68	43.02	8.66
Miss.....	38.93	37.22	1.71	---	44.49	43.44	1.05	43.53	43.53	---	10.61	10.61	---
Mo.....	66.98	58.64	8.34	---	75.00	75.00	---	69.69	67.33	2.36	24.02	23.73	.29
Mont.....	71.99	71.55	.43	---	83.82	82.24	1.58	78.73	78.71	.02	35.22	35.09	.13
Nebr.....	90.91	42.34	48.57	---	100.88	55.06	45.82	97.11	48.29	48.82	30.60	28.04	2.56
Nev.....	89.47	66.66	22.80	---	121.33	97.12	24.21	(5/)	(5/)	(5/)	31.94	29.93	2.01
N. H.....	100.78	79.10	21.68	61.23	104.74	84.84	19.90	113.85	78.65	35.20	42.85	35.75	7.10
N. J.....	79.97	60.93	19.04	210.63	84.96	73.28	11.68	94.56	66.86	27.70	48.41	45.51	2.89
N. Mex. 2/.....	73.99	58.07	15.93	---	89.62	73.27	16.35	85.55	69.02	16.53	32.79	29.79	3.00
N. Y.....	92.44	69.95	22.48	317.82	111.17	81.73	29.43	127.95	69.74	58.21	44.19	38.10	6.10
N. C.....	58.93	50.49	8.43	---	65.71	60.96	4.75	69.96	57.70	12.26	24.10	22.13	1.97
N. Dak.....	92.07	61.23	30.84	228.52	76.80	65.95	10.85	121.47	61.83	59.64	43.60	34.74	8.86
Ohio.....	85.84	65.64	20.20	---	86.82	69.79	17.02	79.21	61.19	18.02	32.08	28.79	3.29
Okla. 2/.....	95.69	77.78	17.90	160.50	121.46	103.43	18.03	111.12	93.32	17.80	34.64	32.17	2.47
Oreg.....	68.37	56.48	11.89	135.38	82.14	74.15	8.00	63.91	44.51	19.40	37.61	34.99	2.62
Pa.....	73.42	62.40	11.02	231.33	74.46	70.86	3.60	66.32	52.97	13.35	28.59	27.07	1.52
P. R.....	9.18	8.50	.69	32.71	8.38	8.38	---	8.63	8.63	---	4.04	4.04	---
R. I. 2/.....	85.00	69.50	15.50	---	85.16	70.16	15.00	90.62	73.02	17.60	40.21	34.31	5.90
S. C.....	52.28	40.46	11.81	168.88	62.01	54.26	7.75	54.41	45.30	9.11	16.29	15.19	1.10
S. Dak.....	84.13	69.13	15.00	---	69.13	69.13	---	69.71	69.71	---	30.42	30.42	---
Tenn.....	53.03	42.23	10.80	46.45	52.56	50.26	2.30	50.35	48.45	1.90	20.09	19.45	.63
Tex.....	69.99	57.94	12.05	---	69.38	69.38	---	57.27	57.27	---	17.85	17.85	---
Utah.....	68.34	57.05	11.30	110.92	73.51	60.17	13.34	68.66	40.94	27.71	32.34	28.13	4.21
Vt. 2/.....	85.19	48.21	36.97	245.89	67.96	57.19	10.77	83.90	60.74	23.16	29.89	29.89	---
V. I.....	34.37	31.37	3.00	21.78	(4/)	(4/)	(4/)	34.15	33.15	1.00	17.10	16.97	.14
Va.....	62.22	44.77	17.45	142.51	67.79	57.78	10.01	67.71	54.71	13.00	24.19	22.95	1.24
Wash.....	78.30	61.55	16.75	143.49	90.01	70.33	19.69	58.86	32.69	26.16	35.00	29.79	5.22
W. Va.....	49.13	38.28	10.85	23.45	48.11	42.15	5.96	51.34	40.46	10.88	26.77	23.14	3.62
Wis.....	105.07	32.01	73.07	---	99.79	50.82	48.97	110.60	38.95	71.64	46.48	39.49	6.99
Wyo.....	85.10	68.74	16.36	(4/)	78.98	72.07	6.91	79.63	68.28	11.35	38.06	35.83	2.24

1/ Averages based on cases receiving money payments, vendor payments for medical care, or both. Money payments may also include small amounts for assistance in kind and vendor payments for other than medical care. Averages for general assistance not computed because of difference among States in policy or practice regarding use of general assistance funds to pay medical bills for recipients of the special types of public assistance. 2/ Except for aid to families with dependent children, data for each program represent average payments for recipients of the specified type of assistance under program for aid to the aged, blind, or disabled or for such aid and medical assistance for the aged. 3/ Data for March; April and May data not available. 4/ Average payment not computed on base of fewer than 50 recipients. 5/ No program for aid to the permanently and totally disabled.

Old-age, survivors, and disability insurance benefits, summary data, May 1964

CURRENT MONTH DATA

Type of benefit	Benefits awarded in May 1964		Benefits in current-payment status, end of May 1964			Amount of benefits paid 1/ in May 1964 (in thousands)
	Number	Average amount	Number	Monthly rate (in thousands)	Average amount	
Total, OASI and DI	299,190	---	---	---	---	$1,349,495
Total, OASI	267,641	---	---	---	---	1,242,699
Monthly benefits, OASI and DI	214,191	---	19,432,035	$1,292,945	---	1,332,402
Monthly benefits, OASI	182,642	---	17,930,827	1,196,458	---	1,225,606
Monthly benefits, DI	31,549	---	1,501,208	96,487	---	106,796
Old-age (retired-worker)	89,706	$79.45	10,467,639	808,982	$77.28	821,245
Disability (disabled-worker)	15,446	95.26	853,250	77,466	90.79	85,160
Wife's or husband's (OASI and DI)	31,837	38.38	2,772,008	109,778	39.60	113,552
Wife's or husband's (OASI)	27,043	39.22	2,598,733	104,215	40.10	107,135
Wife's or husband's (DI)	4,794	33.62	173,275	5,563	32.11	6,417
Widow's or widower's	22,660	72.95	2,074,286	139,556	67.28	144,923
Parent's	314	79.65	36,685	2,552	69.57	2,821
Child's (OASI and DI)	45,215	---	2,760,044	126,884	---	134,972
Child's (OASI--total)	33,906	---	2,285,361	113,426	---	119,753
Child's (OASI--life) 2/	9,396	27.26	426,552	11,969	28.06	12,670
Child's (OASI--survivor) 2/	24,510	52.57	1,858,809	101,457	54.58	107,083
Child's (DI)	11,309	28.30	474,683	13,458	28.35	15,219
Mother's	9,013	60.67	468,123	27,727	59.23	29,729
Lump-sum death payments	84,999 3/	213.02	---	---	---	17,093

COMPARATIVE DATA

Item	May 1964	April 1964	May 1963
Number of benefits in current-payment status, end of month:			
Total, OASI and DI	19,432,035	19,392,456	18,530,817
Total, OASI	17,930,827	17,897,800	17,167,657
Total, DI	1,501,208	1,494,656	1,363,160
Amount of benefits paid (in thousands):			
Total, OASI and DI	$1,349,495	$1,354,441	$1,290,388
Total, OASI	1,242,699	1,246,416	1,190,585
Total, DI	106,796	108,025	99,803
Number of old-age (retired-worker) benefits:			
Awarded	89,706	102,758	102,085
In current-payment status, end of month	10,467,639	10,449,652	9,990,216
Average old-age (retired-worker) benefit:			
Awarded	$79.45	$79.73	$79.33
In current-payment status, end of month	77.28	77.27	76.63
Number of disability insurance (disabled-worker) benefits:			
Awarded	15,446	18,551	19,427
In current-payment status, end of month	853,250	849,897	781,073
Average disability insurance (disabled-worker) benefit:			
Awarded	$95.26	$95.11	$94.62
In current-payment status, end of month	90.79	90.77	90.27
Number of persons aged 62 and over receiving monthly benefits, end of month (OASI and DI) 4/	15,200,000	15,170,000	14,520,000
Number of persons aged 65 and over receiving monthly benefits, end of month (OASI and DI) 4/	13,357,000	13,335,000	12,779,000
Assets of trust funds, end of month (in millions):			
OASI	$19,861	$18,129	$19,220
DI	2,268	2,154	2,392

1/ Exceeds monthly amount of benefits in current-payment status because initial payments include amounts payable for prior months. Distribution by type of monthly benefit estimated.
2/ Distribution by type of claim for OASI child's benefits estimated.
3/ Average lump sum per worker; 80,242 deceased workers represented in the current month's lump-sum awards.
4/ Numbers estimated to the nearest thousand.

Source: Division of the Actuary, Social Security Administration.

DEPARTMENT OF
EALTH, EDUCATION, AND WELFARE
Welfare Administration
WASHINGTON, D. C. 20201

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